RI SOS Filing Number: 200943319030 Date: 02/26/2009 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** $50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
122353	Novelle Financial Services, Inc.			
3. Street Address Principal Business Office		City	State	Zip
19500 Jamboree Rd Suite 102		Irvine	CA	92612
4. Business Phone No.	5. State of Incorporation			
877-203-4732	Delaware			

6. Brief Description of the Character of Business Conducted in Rhode Island
Mortgage Loans

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Mallory P. Hill			None		
Street Address			Street Address		
19500 Jamboree Rd Suite 102					
City	State	Zip	City	State	Zip
Irvine	CA	92612			
Secretary Name			Treasurer Name		
Mary Ann Pradera			Mary Ann Pradera		
Street Address			Street Address		
19500 Jamboree Rd Suite 102			19500 Jamboree Rd Suite 102		
City	State	Zip	City	State	Zip
Irvine	CA	92612	Irvine	CA	92612

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Mallory P. Hill			None		
Street Address			Street Address		
19500 Jamboree Rd Suite 102					
City	State	Zip	City	State	Zip
Irvine	CA	92612			
Director Name			Director Name		
None			None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
12	PREF	$0.01
100	COMMON	$0.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted]

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature *Date* 2-25-09

Mallory P. Hill
Print or Type Name

[redacted] President/CEO
Title

File Date 2-26-09
Check No. 2675
By: MNC

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Form 630 Rev. 08/08