

Filing Fee: \$50.00

ID Number: 00016078<sup>9</sup>



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

Office of the Secretary of State  
Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615

**STATEMENT OF ABANDONMENT OF  
USE OF FICTITIOUS BUSINESS NAME**

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company or limited partnership hereby abandons the use of a fictitious business name in the transaction of business in the state of Rhode Island and submits the following:

1. The legal name of the applicant business corporation, limited liability company, or limited partnership is: **Proficio Mortgage Ventures, LLC**
2. The fictitious business name being abandoned is **The MIGroup Mortgage Resources**
3. The date when the original fictitious business name statement was filed is **04/03/2008**
4. The state or territory under the laws of which it is incorporated, organized or formed is **DE**
5. The date of incorporation, organization or formation is **01/08/2007**
6. If a business corporation, the address of the registered office within Rhode Island is **222 Jefferson Blvd, Ste 220  
Warcik, RI 02888**

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 3/15/2010

**Proficio Mortgage Ventures, LLC**  
Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By \_\_\_\_\_  
Signature of Authorized Officer of the Corporation

By *Ronald J. Himmelsbach, General Counsel*  
Signature of Authorized Person for the Limited Liability Company

or  
By \_\_\_\_\_  
Signature of Authorized Person for the Limited Partnership

**FILED**

**MAR 29 2010**

By *DS* *10/15*  
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**RECEIVED**  
SECRETARY OF STATE  
CORPORATIONS DIV  
2010 MAR 29 AM 10:15



# State of Rhode Island and Providence Plantations

**A. Ralph Mollis**

*Secretary of State*

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly  
executed in accordance with the provisions of Title 7 of the General Laws  
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

*Secretary of State*

