

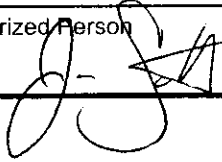


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

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BUS. SVCS. DIV.
2016 OCT - 6 PM 3:21

1. Entity ID Number 661124		2. Exact name of the Limited Liability Company Hybrid Capital Group, LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island Commerical Mortgage Broker			
5. State of Formation Rhode Island					
6. Principal Office Address 756 Eddy Street, Suite 400		City Providence		State RI	Zip 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Joseph Giuttari			Contact Title		
Street Address 756 Eddy Street, Suite 400			City Providence		State RI Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person JOSEPH GIUTTARI				Date 10/6/2016	
Signature of Authorized Person 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

OCT 06 2016

By 1285391