S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 029 (401) 222-30		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000142599</u>	2		
2. Exact Name of the Limited Liability Company Mortgage Research Center, LLC			
3. State of Formation			
State: MO			
ARTICLE III			
of business in which your e	ed NAICS Code below, select the class entity engages. The box to the right of ction. If the NAICS Code is known, en a classification <u>click here.</u>	the dropdown will populate a I	NAICS Code
NAICS Code		<u>6</u> <u>52</u>	
4. Brief Description of th	e Character of the Business Whick	n is Actually Conducted in R	hode Island
5. Principal Office Addre	SS		
	ETERANS UNITED DRIVE		
City or Town: <u>COLU</u>		State: <u>MO</u> Zip: <u>65203</u> C	ountry: <u>USA</u>
-	mited Liability Company and Name		
	<u>COOPER</u> Contact Title: <u>GENERAL</u> ETERANS UNITED DRIVE	<u>. COUNSEL</u>	
City or Town: COLUN		State: <u>MO</u> Zip: <u>65203</u> C	ountry: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Lial RS	oility Company, if Applicable).
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix BRANT BUKOWSKY	Address, City or Town, State, Zip	
MULTINGEN .		1400 VETERANS UNIT	IED DRIVE

MANAGER

BROCK BUKOWSKY

COLUMBIA, MO 65203 USA

1400 VETERANS UNITED DRIVE COLUMBIA, MO 65203 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 20 Day of July, 2017 at 12:12:59 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By BROCK COOPER

Signature of Authorized Person

Form No. 632 Revised 09/07

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