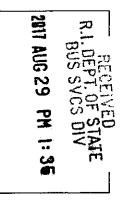


State of Rhode Island and Providence Plantations Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00



Pursuant to the provisions of RIGL <u>7-16-9</u> the undersigned limited liability company hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. Entity ID Number	2. Exact Name of the Li	2. Exact Name of the Limited Liability Company		
000160645	Pacific Union Financial,	Pacific Union Financial, LLC		
3. The fictitious business	name to be used is:		·····	
LoanIt				
4. The state or country the entity is formed is:		5. The date of forma	5. The date of formation is:	
California		09/07/2004	09/07/2004	
6. Applicant is otherwise	authorized to do business in t	he state of Rhode Island.		
Under penalty of perjur the information contain	y, I declare and affirm that I and herein is true and correc	have examined this Fictiti	ous Business Name State and that	
Name of Applicant Limite			Date	
Pacific Union Financial, LLC			08/23/2017	
Signature of Authorized Person SIGN DOCUMENT HERE				

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

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If you have any questions, please call us at (401) 222-3040, Monday through Eriday, Finday, FORM 624 LLC - Revised: 06/2016



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, 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:

August 29, 2017 01:36 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

