°	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	reet	
HOPE	(401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>000107148</u>			
2. Exact Name of the Limited Liability Company <u>GREENPOINT CREDIT, LLC</u>			
3. State of Formation			
State: <u>DE</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
524210			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
FORMALLY ORIGINATED, SERVICED AND SECURITIZED MANUFACTURED HOUSING			
LOANS			
5. Principal Office Addre	ess		
	CAPITAL ONE DRIVE	to: VA 75: 22102 Con	
City or Town: <u>MCL</u>	EAN Su	ite: <u>VA</u> Zip: <u>22102</u> Cou	ntry: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Person:	
Contact Name: Contact Title:			
No. and Street: <u>1680</u> City or Town: <u>MCLE</u>	CAPITAL ONE DRIVE EAN Sta	te: <u>VA</u> Zip: <u>22102</u> Cou	ntry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	code, Country
MANAGER	PAMELA M. KOCH	1680 CAPITAL ONE DRIVE MCLEAN, VA 22102 USA	

JEFFREY M. JULIANE

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 24 Day of October, 2017 at 9:24:10 AM 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 WARRENETTA C. BAKER

Signature of Authorized Person

Form No. 632 Revised 09/07

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