RI SOS Filing Number: 201755197010 Date: 12/19/2017 12:02:00 PM

B	State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annua Limite	Report for the year:	

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

								
1. Entity ID Number	2. Exact name	of the Limited Lia	ability Company					
000799856	1st American Home Joans &JC							
3. NAICS Code	4. Brief descrip	ption of the charac	acter of business conducted in Rhode Island					
5. State of Formation			laAgage Broker					
CT								
6. Principal Office Address	<u> </u>		City	State	7:-			
559 Hartfird Tumpite,			Dagnile	CT	2ip 06241			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Contact Name Erin Wilux		· · · · · · · · · · · · · · · · · · ·	Contact Title Compliance					
Street Address 559 Hartford Turngike,	Sixte 201)	1 haille	State	Zip 06241			
b. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS								
Manager Name			Manager Name					
Street Address 7			Street Address					
CHO	State	Zip	City	State				
Manager Name			Manager Name					
Street Address			Street Address		9 五次			
5 3.			COC -					
City	State	Zip	City	State	ZAN O			
Check the box to indicate an attach in all								
9. Resident Agent in Rhode Island. This Information is currently of record with the Department of State. Changes require filing Form \$42								
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 Date								
Erin Williax	<u> </u>		12/12	117				
Signature of Authorized Person								
Fatholula ()								
7:00 FILED								

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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