

**Application for Registration**FOREIGN Limited Liability Company

→ Filing Fee: \$150.00		RECEITARY ORAT	
Pursuant to the provisions of RIGL $7-16-49$ , the undersigned fo applies for a Certificate of Registration to transact business in tourpose submits the following statement:		nereby P PP	
The name of the limited liability company is:		01 01	
Precision Lending, LLC			
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes No 🗸			
The name, if different, under which it proposes to register and transact business in Rhode Island is:			
2. The LLC is organized under the laws of: New Hampshire			
3. The date of its organization is: 11/14/2018			
And the period of its duration is: CHECK ONE BOX ONLY			
Perpetual (on-going)			
Date certain for dissolution			
4. The name and address of the resident agent/office in Rhode Island is:			
Agent Name Dayro L. Jaramillo			
Street Address (NOT a P.O. Box)  17 Breakneck Hill Road			
City/Town Lincoln	State RHODE ISLAND	Zip Code <b>02865</b>	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
The business will be a mortgage broker. It will secure mortgage loans for consumers through wholesale lenders			
the business chooses to set up accounts with.			
Check the box to indicate an attachment			

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

FORM 450 - Revised 11/2017

	d the agent of the foreign limited liability company for ne resident agent cannot be found or served following		
<ol><li>The address of the office required to be if not so required, of the principal office of</li></ol>	maintained in the state or country of its organizatio the foreign limited liability company is:	n by the laws of that state or,	
264 South River Road, Bedford, New H	ampshire 03110		
8. The mailing address for the limited liabi	lity company is:		
264 South River Road, Bedford, New H	ampshire 03110		
9. Management of the Limited Liability Co	mpany:		
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX		
By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	below.)	
By one (1) or more managers (List m	anagers below)		
MANAGER	ADDRESS		
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.			
11. Date when this application for Certifica	ate of Registration will be effective: CHECK ONE BO	OX ONLY	
Date received (Upon filing)			
Later effective date (Date must be no	o more than 30 days from the date of filing) ////	<del>}</del>	
	firm that I have examined this Application for Registr statements contained herein are true and correct.	ation, including any	
Type or Print Name of LLC		Date	
Precision Lending, LLC		12/18/2018	
Signature of Authorized Person			
Sand In	SIGN DOCUMENT HERE		

## State of New Hampshire Department of State

## **CERTIFICATE**

1. William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that PRECISION LENDING LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on November 14, 2018. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 807109

Certificate Number: 0004210892



## IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Scal of the State of New Hampshire, this 14th day of November A.D. 2018.

William M. Gardner Secretary of State