S S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290	reet	
HOPE	(401) 222-304	40	
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: 2019			
<b>1. ID No.</b> <u>000871400</u>			
2. Exact Name of the Limited Liability Company Eagle Home Mortgage, LLC			
3. State of Formation			
State: <u>FL</u>			
ARTICLE III			
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.			
<u>531390</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
MORTGAGE FINANCING			
5. Principal Office Addre	SS		
No. and Street:730 NW 107TH AVENUE, 4TH FLOORCity or Town:MIAMIState:FLZip:33172Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 700 N.W. 107TH AVENUE, SUITE 400			
City or Town: MIAMI State: <u>FL</u> Zip: <u>33172</u> Country: <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 Co	ode, Country
MANAGER	JAMES T TIMMONS	790 NW 107TH AVENUE, S MIAMI, FL 33172 USA	SUITE 117
MANAGER	LAURA ESCOBAR	730 N.W. 107TH AVENUE, 4	TH FLOOR

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

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

**Signed this 8 Day of August, 2019 at 5:47:49 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 MARK SUSTANA

Signature of Authorized Person

Form No. 632 Revised 09/07

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