

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:

ubmits the following statemer fictitious business name:	it for authority to transact business in the state of the	0
1. Entity ID Number	2. Exact Name of the Limited Liability Company	
1723169	Change Lending, LLC	
3. The fictitious business nan	ne to be used is:	
Change Home Mortgage		
4. The limited liability company is organized under the laws of: California		5. The date of formation is:
		11.100.10
Applicant is otherwise auti	norized to do business in the state of Rhode Island.	Durings Name Statement and
Under penalty of perjury, I that the information contains	declare and affirm that I have examined this Fictition ned herein is true and correct.	us Business Name Statement and
Name of Applicant Limited Liability Company		Date
Change Lending, LLC		
Signature of Authorized Pers		-1. (4)
the At	allarely document here	516121

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 Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 624B LLC - Revised: 11/2017