RI SOS Filing Number: 202196331810 Date: 5/7/2021 12:08:00 PM

State of Rhode Island and Providence Plantations **Department of State - Business Services Division Fictitious Business Name Statement** DOMESTIC or FOREIGN Limited Liability Company → Filing Fee: \$50.00 Pursuant to the provisions of RIGL 7-16-9 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: 2. Exact Name of the Limited Liability Company 1. Entity ID Number **Change Lending, LLC** 3. The fictitious business name to be used is: Change Wholesale 5. The date of formation is: 4. The limited liability company is organized under the laws of: California 6. Applicant is otherwise authorized to do business in the state of Rhode Island. Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct. Name of Applicant Limited Liability Company Change Lending, LLC

SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Melill

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

Signature of Authorized Person

FILED

MAY 0 7 2021

A.A. 12:08pm

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

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

May 07, 2021 12:08 PM

Nellie M. Gorbea Secretary of State

Tullin U. Horler

