RI SOS Filing Number: 202449090680 Date: 3/18/2024 4:00:00 PM



## State of Rhode Island Department of State - Business Services Division

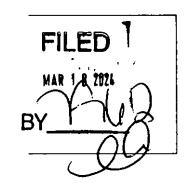
Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



Entity ID Number	2. Exact name of the Limited Liability Company				
000106021	MCN Mortgage Company, LLC  4. Brief description of the character of business conducted in Rhode Island				
3. NAICS Code					
522291	Construction Mortgage	Construction Mortgage Lending			
5. State of Formation	<del>-  </del>				
СТ					
6. Principal Office Address		City	State	Zip	
11 Timothy Drive		Westerly	RI	02891	
7. Mailing Address of Limite	d Liability Company and Name or Tit	le of Contact Person			
Contact Name A. Michael Slosberg		Contact Title Manager			
Street Address 11 Timothy Drive		City Westerly	State RI	<sup>Zip</sup> 02891	
8. The Resident Agent infor	mation currently of record with the RI	Department of State is according	urate. Changes requir	e filing Form 642.	
	y, I declare and affirm that I have e tatements contained herein are tru	•	ding any accompany	ring schedules and	
Name of Authorized Person			Date		
A. Michael Slosberg			3/12/2024		
Signature of Authorized Per	en en Man		<u> </u>		

MAIL TO:

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

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