RI SOS Filing Number: 202454990090 Date: 5/28/2024 12:15:00 PM

State of Rhode Island			•. •		_	
Department of Sta	te - Business	Services Di	vision	•		
Annual Report for the year Corporation	ar: <u>2024</u>					
→ Filing period: February 1 - M → Filing Fee: \$50.00	May 1					
→ Penalty: Additional \$25.00 fe	e if form is not fil	ed by May 31.				
Entity ID Number	2. Exact name of the Corporation					
001709885	2. Exact name of the Corporation  Maxwell Lender Solutions, Inc.					
3. Principal Office Address			City		State	Zip
1700 Lincoln St, Suite 2900			Denver		CO	80203
4. NAICS Code	Brief description of the character of business conducted in Rhode Island					
522291	Loan fulfillment services					
State of Incorporation	]					
Delaware						
7. List ALL officers (names and addresses)  Check the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to indicate an attachment leads to be a support of the box to be a suppo						
Fresident Name			Vice-President Name			
Street Address			Street Address			
City	State	Zip	City		State	Zip
ecretary Name			Treasurer Name			
Street Address			Street Address			
City	State	Zip	City		State	Zip
8. List ALL directors (names and ad	ldresses)				ne box to ir	ndicate an attachment 🔲
Director Name			Director Name			
Street Address			Street Address			
City	State	Zıp	City		State	Zip
Director Name			Director Name			
Street Address	Street Address					
City	State	Zip	City		State	Zip
9. Shares Authorized		10. Shares Issue		Check the box to indicate an attachment		
This information is currently of record in the Department of State.		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE
Changes require an additional filing.		0		CWP		\$00.000C
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or						
trustee, this report must be executed on behalf of the corporation by the receiver or trustee.						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
Name of Authorized Representative  MAY 2 8 2024  Date  03/01/2024						
Dilait Sitions (03/01/2024)						
Signature of Authorized Representative  Brian L Simons  BY						
Uruan L Sumons						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

## Maxwell Lender Solutions, Inc. / Entity# 001709885

## Officers:

John Nathan Paasonen, CEO 1700 Lincoln St, Suite 2900, Denver, CO 80203

Brian Simons, President 1700 Lincoln St, Suite 2900, Denver, CO 80203

Brian Simons, Secretary 1700 Lincoln St, Suite 2900, Denver, CO 80203

John Nathan Paasonen, Treasurer 1700 Lincoln St, Suite 2900, Denver, CO 80203

Rutul Dave, Chief Technology Officer 1700 Lincoln St, Suite 2900, Denver, CO 80203

## Directors:

John Nathan Paasonen, Director 1700 Lincoln St, Suite 2900, Denver, CO 80203

Brian Simons, Director 1700 Lincoln St, Suite 2900, Denver, CO 80203

Rutul Dave, Director 1700 Lincoln St, Suite 2900, Denver, CO 80203