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State of Rhode Island

Department of State - Business Services Division

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Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL <u>7-1,2-402</u>, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a firstitious business name:

nctitious business name:			
1. Entity ID Number:	2. The name of the Corporation is:		
001723480	Success Mortgage Partners, Inc.		
3. The fictitious business name to be used is:			
SMP Mortgage, Inc.			
4. The corporation is organized under the laws of:		5. The date of incorporation is:	
Michigan		05/01/2002	
6. The address of its registered office within Rhode Island is:			
Street Address 222 Jefferson Boulevard, Suite 200			
City Warwick		State RHODE ISLAND	^{Zip} 02888
7. The business in which it is engaged: Residential mortgage lending.			
8. Applicant is otherwise authorized to do business in the state of Rhode Island.			
9. 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 Authorized Officer of the Corporation			Date
Owen V. Lee			09/18/2024
Signature of Authorized Officer of the Corporation			

MAIL TO:

Division of Business Services

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

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

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BY 49044

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.

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I, GREGG M. AMORE, 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:

September 24, 2024 12:55 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

