RI SOS Filing Number: 202578065030 Date: 9/8/2025 3:42:00 PM



State of Rhode Island

Department of State - Business Services Division

## REC'D RIDOS 85D 25 SEP 3 FM3:42:17

## **Statement of Registration**

FOREIGN Limited Partnership

→ Filing Fee: \$100.00 minimum

Pursuant to the provisions of RIGL <u>7-13.1-1003</u>, the undersigned foreign limited partnership hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

| The name of the limited partnership is:  |                                  |                |  |
|--|----------------------------------|----------------|--|
| D2 Residential Capital Partners, LP  |                                  |                |  |
| The name, if different, which it elects to use in Rhode Island   | 1 is:                            |                |  |
|  |                                  |                |  |
| The limited partnership is organized under the laws of:  | 3. The date of its formation is: |                |  |
| Delaware   | 7/18/2025                        |                |  |
| Origination and servicing of loans for investment property, not be serviced as the servicing of loans for investment property, not be serviced as the serviced |                                  | ancing         |  |
| Agent Name Corporation Service Company   |                                  |                |  |
| Street Address (NOT a P.O. Box) 222 Jefferson Boulevi  | ard, Suite 200                   |                |  |
| City/Town Warwick  | State<br>RHODE ISLAND            | Zip Code 02888 |  |
| <ol><li>The Department of State is appointed the agent of the for<br/>time, there is no registered agent or if the registered agent of<br/>diligence.</li></ol>  |                                  |                |  |

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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FORM - 350 Revised: 12/2023

|   | <del></del>                                |         |                |  |
|---|--|---------|----------------|--|
| 7. The address, if applicable, of the office required to be maintained in the state or country of its organization is:  |  |         |                |  |
| Corporation Trust Center 1209 Orange St<br>Wilmington, DE 19801   |  |         |                |  |
| 1   |  |         |                |  |
|   |  |         |                |  |
| 8. The name and business address of each general partner is:  |  |         |                |  |
| GENERAL PARTNER   | BUSINESS ADDRESS                           |         |                |  |
| D2 Residential Capital Partners GP, LLC   | 2525 Knight St, Suite 275 Dallas, TX 75219 |         |                |  |
|   |  |         |                |  |
|   |  |         |                |  |
|   |  |         | •              |  |
| 9. The address of the foreign limited partnership's principal place of business is:   |  |         |                |  |
| Address 3838 Oak Lawn Ave, Suite 1200   |  |         |                |  |
| City/Town Dallas  |  | State   | Zip Code 75219 |  |
|   |  | TX      |                |  |
| 10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.                                       |  |         |                |  |
| 11. Date when this Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY  Date recieved (upon filing)  Later effective date (date must be no more than 90 days from the date of filing) |  |         |                |  |
| Under penalty of perjury, I declare and affirm that I have examined this Statement of Registration, including any accompanying attachments, and that all statements contained herein are true and correct.                  |  |         |                |  |
| Type or Print Name of General Partner   |  | Date    |                |  |
| Director of D2 Residential Capital Partners GP, LLC   |  | 8-29-25 |                |  |
| Signature of General Partner  |  |         |                |  |
| Luke Doramus  |  |         |                |  |

Page 1



I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAMARE, DO HEREBY CERTIFY "D2 RESIDENTIAL CAPITAL PARTNERS GP,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE SIXTH DAY OF AUGUST, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "D2 RESIDENTIAL CAPITAL PARTNERS GP, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Charuni Patibende-Senobez, Secretary of State
Authentication: 204405434

C. B. Sancher

Date: 08-06-25

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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 08, 2025 03:42 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

