2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003372

Entity Name: NEWREZ LLC

Jan 23, 2020 **Secretary of State** 7234254716CC

FILED

Current Principal Place of Business:

1100 VIRGINIA DRIVE

SUITE 125

FORT WASHINGTON, PA 19034

Current Mailing Address:

1100 VIRGINIA DRIVE **SUITE 125**

FORT WASHINGTON, PA 19034 US

FEI Number: 37-1542226 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title **MANAGER** Title **MANAGER**

HARRIGAN, KEVIN Name Name WILLIAMS, BRUCE Address 1100 VIRGINIA DRIVE Address 880 THIRD AVENUE **SUITE 125**

12TH FLOOR

NEW YORK NY 10022

FORT WASHINGTON PA 19034 NEW YORK NY 10022 City-State-Zip: City-State-Zip:

Title **MANAGER** Title **MANAGER**

NAVARRO, JACK SHELLPOINT PARTNERS LLC Name Name

75 BEATTIE PLACE 880 THIRD AVENUE Address Address

SUITE 200 12TH FLOOR

City-State-Zip:

GREENVILLE SC 29601 City-State-Zip:

Title **MANAGER**

MCSHERRY, JOSEPH Name 1100 VIRGINIA DRIVE Address

SUITE 125

FORT WASHINGTON PA 19034 City-State-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE WILLIAMS MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

01/23/2020 Date