

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000003372

**Entity Name:** NEWREZ LLC

**Current Principal Place of Business:**

601 OFFICE CENTER DRIVE  
SUITE 100  
FORT WASHINGTON, PA 19034

**Current Mailing Address:**

601 OFFICE CENTER DRIVE  
SUITE 100  
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  
Name           MOSNESS, SPENCER  
Address       601 OFFICE CENTER DRIVE  
                  SUITE 100  
City-State-Zip: FORT WASHINGTON PA 19034

Title           MEMBER  
Name           SHELLPOINT PARTNERS LLC  
Address       880 THIRD AVENUE  
                  12TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title           MANAGER  
Name           SILVERSTEIN, BARON  
Address       601 OFFICE CENTER DRIVE  
                  SUITE 100  
City-State-Zip: FORT WASHINGTON PA 19034

Title           MANAGER  
Name           SANTORO, NICOLA  
Address       601 OFFICE CENTER DRIVE  
                  SUITE 100  
City-State-Zip: FORT WASHINGTON PA 19034

*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:** SPENCER MOSNESS

**MANAGER**

**04/18/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date