0260648.04



Michael G. Adams Kentucky Secretary of State Received and Filed: 12/27/2022 3:11 PM Fee Receipt: \$20.00

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business	Filings
P.O. Box 718	
Frankfort, KY 40602	
(502) 564-3490	
www.sos.ky.gov	

Certificate of Withdrawal of Assumed Name (Domestic or Foreign Business Entity)

CWA

tsemones WTH

Pursuant to the provisions of KRS 365, the undersigned applicant applies to withdraw an assumed name and, for that purpose,
submits the following statements:

	. The assumed name to be withdrawn is NewRez Lending (The name must be identical to the name on record with the Secretary of State.)						
2.	The assumed name has been discontinued by Caliber Home Loans, Inc. (Must be the exact name of the entity or partners)						
	This application will be effective upon filing.						
4.	The date the original certificate was filed: 12/14/2021	*					
	The "real name" is (you must check one):						
	_a Domestic General Partnership	_a Foreign General Partnership					
	_a Domestic Limited Liability Partnership	a Foreign Limited Liability Partnership					
	a Domestic Limited Partnership	a Foreign Limited Partnership					
	a Domestic Business Trust	a Foreign Busine					
	_a Domestic Corporation	X_a Foreign Corpo					
	a Domestic Limited Liability Company	a Foreign Limite	d Liability Company				
6	The mailing address is:			75019			
1	525 S. Belt Line Road Coppell						
S	treet Address of Post Office Box Numbers City		State	Zip			
I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.							
Spencer Mosness Chief Legal & Compliance Officer 09/14/20							
		ted Name	Title	Date			

Signature of Authorized Party

Printed Name