Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

Amendment
☐ Check box if an Amendment
9 / 25 / 25
Date qualification threshold met (Month, Day, Year)

Date Stamp

CALIFORNIA FORM 409
For Official Use Only

1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY:	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER:	PRINCIPAL/RESPONSIBLE OFFICER PHONE #:	PRINCIPAL/RESPONSIBLE OFFICER EMAIL:
United Wholesale Mortgage, LLC	Lee Jelenic	(800) 981-8898	ljelenic@uwm.com

LLC STREET ADDRESS:	CITY:	STATE:	ZIP CODE:	LLC MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
585 South Boulevard E	Pontiac	MI	48341				

NAME OF COMMITTEE:	COMMITTEE ID:	COMMITTEE PHONE NUMBER:	COMMITTEE EMAIL ADDRESS:
United Wholesale Mortgage, LLC	1480128	(800) 981-8898	ljelenic@uwm.com

COMMITTEE STREET ADDRESS:	CITY:	STATE:	ZIP CODE:	COMMITTEE MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
585 South Boulevard E	Pontiac	MI	48341				

2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

FULL NAME	MEMBERSHIP TYPE	DATE(S) OF CAPITAL CONTRIBUTION (ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)	CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC	PERCENTAGE OWNERSHIP INTEREST
UWM Holdings, LLC	■ MEMBERSHIP 10% OR GREATER ■ CAPITAL CONTRIBUTIONS $10,000 OR MORE	8/5/26	$1,650,000,000	100%
	☐ MEMBERSHIP 10% OR GREATER ☐ CAPITAL CONTRIBUTIONS $10,000 OR MORE			
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3. Names of Member LLCs Listed in Part 2

NAME OF LLC LISTED IN PART 2	FULL NAMES OF MEMBERS
UWM Holdings, LLC	SFS Holdings Corp; UWM Holdings Corporation

4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11/06/2026 (DATE) By _____ (SIGNATURE)

Attach additional information on appropriately labeled continuation sheets.

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