

Filing Fee: \$100.00

ID Number: 100166



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division

FOREIGN LIMITED PARTNERSHIP
APPLICATION FOR CERTIFICATE OF REGISTRATION

Pursuant to the provisions of Section 7-13-49 of the General Laws, 1956, as amended, 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:

1. The name of the limited partnership is Provident Funding Associates, L.P.
(The name must contain the words "limited partnership" or the letters and punctuation "L.P.")

and, if different, the name which it proposes to register and transact business in the state of Rhode Island is
N/A

2. The limited partnership is organized under the laws of California and the date of its formation is November 14, 1992.

3. The general character of the business it proposes to transact in Rhode Island is Mortgage Banking

4. The name and address of the agent for service of process is Corporation Service Company
(Name of Agent)
170 Westminster Street, Suite 900 Providence RI 02903
(Street Address, not P.O. Box) (City/Town) (Zip Code)

5. The foreign limited partnership hereby agrees that if the foreign limited partnership fails to appoint an agent for service of process or, if appointed, the agent's authority has been revoked or if the agent cannot be found or served with the exercise of reasonable diligence, the foreign limited partnership appoints the Secretary of State of the State of Rhode Island as its agent for service of process.

6. The address of the office required to be maintained in the state of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited partnership is:
1633 Bayshore Highway, Suite 155, Burlingame, CA 94010

7. The name and business address of each general partner is:

General Partner	Business Address
<u>Provident Funding Group, Inc.</u>	<u>1633 Bayshore Highway, Suite 155</u>
_____	<u>Burlingame, CA. 94010</u>
_____	_____
_____	_____
_____	_____

8. The address of the office at which is kept a list of the names and addresses of the limited partners and their capital contributions, together with an undertaking by the foreign limited partnership to keep those records until the foreign limited partnership's registration in this state is cancelled or withdrawn is:

1633 Bayshore Highway, Suite 155, Burlingame, CA 94010

9. A mailing address for the foreign limited partnership is: _____

1633 Bayshore Highway, Suite 155 Burlingame, CA 94010

Dated March 3,
~~February 25~~, 1998

Provident Funding Associates, L.P.
(Exact name of Limited Partnership making application)

By Provident Funding Group, Inc.
General Partner

By *Gerard A. McDonnell*
Gerard A. McDonnell, General Counsel

STATE OF California
COUNTY OF San Mateo

In Burlingame, CA, on this third day of March, 1998, personally appeared before me Gerard A. McDonnell, who, being by me first duly sworn, declared that he/she is ~~a~~ General Partner of the Provident Funding Associates, L.P.

that he/she signed the foregoing documents as a General Partner of the limited partnership, and that the statements therein contained are true.

/s/
Notary Public

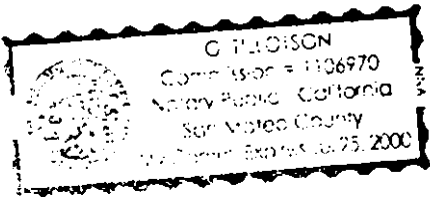
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SECRETARY OF STATE
CORPORATIONS DIV.
APR 20 11 20 AM '98

FILED
APR 20 1998
BY *MD 202334*

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California
 County of San Mateo
 On 3-3-98 before me, G. Tillotson, Notary
Date Name and Title of Officer (e.g. "Jane Doe, Notary Public")
 personally appeared Gerard A. McDonnell
Name(s) of Signer(s)

personally known to me - **OR** - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

G. Tillotson
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document

Description of Attached Document

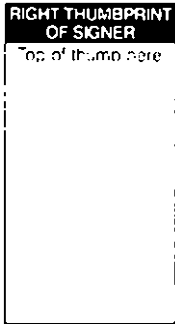
Title or Type of Document: _____
 Document Date: _____ Number of Pages: _____
 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- Individual
- Corporate Officer
 Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

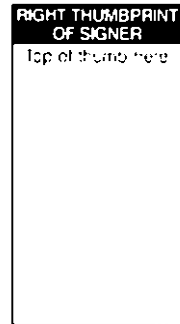
Signer Is Representing: _____



Signer's Name: _____

- Individual
- Corporate Officer
 Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

Signer Is Representing: _____



State of California

SECRETARY OF STATE

**CERTIFICATE OF STATUS
CALIFORNIA LIMITED PARTNERSHIP**

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the 10th day of November, 1992, PROVIDENT FUNDING ASSOCIATES, L.P., became recognized under the laws of the State of California by filing its certificate of Limited Partnership in this office; and

That no record exists in this office of a certificate of cancellation of said limited partnership nor of a court order declaring cancellation thereof; and

That according to the records of this office, the said limited partnership is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this limited partnership.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great
Seal of the State of California this
7th day of March, 1998

Bill Jones

