

Filing and License Fee: \$310.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2012 JAN -5 AM 10:24

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

- 1. The name of the corporation is CrossCountry Mortgage, Inc.
2. It is incorporated under the laws of Ohio
3. The name, if different, which it elects to use in Rhode Island is:

(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:

(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:

- 4. The date of its incorporation is June 27, 2003 and the period of its duration is Perpetual

- 5. The address of its principal office is 6850 Miller Road Brecksville, OH 44141

- 6. The address of its proposed registered office in Rhode Island is 10 Weybosset Street (Street Address, not P.O. Box)

Providence, RI 02903 and the name of its proposed registered agent in Rhode Island at

that address is C T Corporation System (Name of Agent)

FILED

- 7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: To conduct mortgage lending activity

JAN 05 2012

BY W 159980 10/24

- 8. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Table with 2 columns: Name, Address. Rows list Director Ronald Joseph Leonhardt Jr. at 6850 Miller Road Brecksville, OH 44141.

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

	<u>Name</u>	<u>Address</u>
President	Ronald Joseph Leonhardt Jr.	6850 Miller Road Brecksville, OH 44141
Vice President	Ronald Joseph Leonhardt Jr.	6850 Miller Road Brecksville, OH 44141
Treasurer	Ronald Joseph Leonhardt Jr.	6850 Miller Road Brecksville, OH 44141
Secretary	Ronald Joseph Leonhardt Jr.	6850 Miller Road Brecksville, OH 44141

9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or Statement that Shares are without Par Value</u>
900	Common		NO PAR VALUE

10. (a) \$ 4 million = An estimate of the value of all property to be owned by the corporation for the following year, wherever located.

(b) \$ 0 = An estimate of the value of the corporation's property to be located within Rhode Island during the following year.

(c) 0 % = An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. {divide (b) by (a) and multiply by 100 to obtain the percentage}

11. (a) \$ 25 million = An estimate of the gross amount of business to be transacted by the corporation during the following year.

(b) \$ 100,000.00 = An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.

(c) 40% % = An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}

12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.

13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing n/a.

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 01/02/2012



 Signature of Authorized Officer of the Corporation

Ronald Joseph Leonhardt Jr. / President

 Type or Print Name of Authorized Officer

**United States of America
State of Ohio
Office of the Secretary of State**

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show **CROSSCOUNTRY MORTGAGE, INC.**, an Ohio corporation, Charter No. 1396852, having its principal location in Cleveland, County of Cuyahoga, was incorporated on June 27, 2003 and is currently in **GOOD STANDING** upon the records of this office.*



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 2nd day of December, A.D. 2011*

Jon Husted

Ohio Secretary of State



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

