

Filing Fee: \$50.00

ID Number: 1336442



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2015 AUG 21 PM 2:59

BUSINESS CORPORATION

CERTIFICATE OF CORRECTION

Pursuant to the provisions of Section 7-1.2-105 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby submits the following Certificate of Correction:

- The name of the corporation is: SOLAR MOSAIC, INC.
- The document to be corrected is CERTIFICATE OF AUTHORITY
- The document being corrected was originally filed on 6/11/2015
- Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgement:
THE SUITE NO. ON THE OFFICE WAS LEFT OUT.
426 17th ST,
OAKLAND, CA 94612
- The corrected portion of the document states as follows:
426 17th ST, SUITE 600
OAKLAND, CA 94612
- The document attached to this certificate is the corrected document.
- This Certificate of Correction 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 _____

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

Date: 8/20/2015

FILED

Signature of Authorized Officer of the Corporation

AUG 21 2015

BRUCE LEDESMA

Type or Print Name of Authorized Officer

BY CA 255076
2:59

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

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2015 AUG 21 PM 3:19
2:59

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 SOLAR MOSAIC, INC.
2. It is incorporated under the laws of DELAWARE
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 5/24/2011 and the period of its duration is PERPETUAL
5. The address of its principal office is 426 17th ST., SUITE 600, OAKLAND, CA 94612
6. The address of its proposed registered office in Rhode Island is 450 Veterans Memorial Parkway, Suite 7A, East Providence, RI 02914 and the name of its proposed registered agent in Rhode Island at that address is C T Corporation System

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: NON-DEPOSITORY SECURED CONSUMER LENDING AND RELATED SERVICES

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. Lists directors: WILLIAM PARISH, DANIEL ROSEN, ROBERT KELLY, LISA GANSKY, THOMAS DINWOODIE with their respective addresses in Oakland, CA.

(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	<u>DANIEL ROSEN</u>	<u>426 17th ST., STE. 600, OAKLAND, CA 94612</u>
Vice President	<u>THEODORE FAWCETT</u>	<u>426 17th ST., STE. 600, OAKLAND, CA 94612</u>
Treasurer	<u>OLAF JANKE</u>	<u>426 17th ST., STE. 600, OAKLAND, CA 94612</u>
Secretary	<u>BRUCE LEDESMA</u>	<u>426 17th ST., STE. 600, OAKLAND, CA 94612</u>

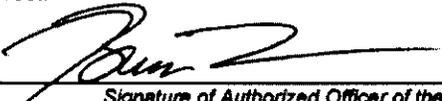
9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or Statement that Shares are without Par Value</u>
<u>19,000,000</u>	<u>COMMON STOCK</u>		<u>\$0.0001</u>
<u>10,040,155</u>	<u>PREFERRED STOCK</u>	<u>A, B & FF</u>	<u>\$0.0001</u>

10. (a) \$ 17,000,000 = 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) \$ 7,480,000 = An estimate of the gross amount of business to be transacted by the corporation during the following year.
- (b) \$ 58,000 = 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) 0.78 % = 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 _____.

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: 8/20/2015



Signature of Authorized Officer of the Corporation

BRUCE LEDESMA

Type or Print Name of Authorized Officer



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, 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 blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

