



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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SECRETARY OF STATE  
PROVIDENCE, RI

2019 JUL 31 AM 10:46

## Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee. \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, 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:<br><b>Cstone Mortgage, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           |                       |
| 2. It is incorporated under the laws of:<br><b>California</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           |                       |
| 3. The name, if different, which it elects to use in Rhode Island is:<br><br>(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:<br><br>(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: <b>8/15/2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |                       |
| And the period of its duration is: <b>CHECK ONE BOX ONLY</b><br><input checked="" type="checkbox"/> Perpetual (on-going)<br><input type="checkbox"/> Date certain for dissolution _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                       |
| 5. The address of its principal office is: <b>2655 Camino del Rio North, Suite 450<br/>San Diego, CA 92108</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |                       |
| 6. The name and address of the initial registered agent/office in Rhode Island:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                           |                       |
| Agent Name <b>Corporation Service Company</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           |                       |
| Street Address (NOT a P.O. Box) <b>222 Jefferson Boulevard, Suite 200</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |                       |
| City/Town <b>Warwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | State <b>RHODE ISLAND</b> | Zip Code <b>02888</b> |

**MAIL TO:**

**Division of Business Services**  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Residential Mortgage Lending and Brokering

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):

| NAME               | ADDRESS                                                   |
|--------------------|-----------------------------------------------------------|
| Erik Lee Jorissen  | 2655 Camino del Rio North, Suite 450, San Diego, CA 92108 |
| Sean Ziegler Cahan | 2655 Camino del Rio North, Suite 450, San Diego, CA 92108 |
|                    |                                                           |
|                    |                                                           |

Check the box to indicate an attachment ☐

8. (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):

| OFFICE         | NAME               | ADDRESS                                                     |
|----------------|--------------------|-------------------------------------------------------------|
| PRESIDENT      | Erik Lee Jorissen  | 2655 Camino del Rio North, Suite 450<br>San Diego, CA 92108 |
| VICE PRESIDENT | Sean Ziegler Cahan | 2655 Camino del Rio North, Suite 450<br>San Diego, CA 92108 |
| TREASURER      |                    |                                                             |
| SECRETARY      |                    |                                                             |

Check the box to indicate an attachment ☐

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:

| NUMBER OF SHARES | CLASS  | SERIES | PAR VALUE OR STATE NO PAR VALUE |
|------------------|--------|--------|---------------------------------|
| 10               | Common |        | No Par Value                    |
|                  |        |        |                                 |
|                  |        |        |                                 |
|                  |        |        |                                 |

10. An estimate, **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. (Note: Percentage obtained from worksheet.)

0 %

11. An estimate, **as a percentage**, of the proportion 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 compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

3 %

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of 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.*

Type or Print Name of Authorized Officer

Erik Lee Jorissen

Date

7/30/19

Signature of Authorized Officer of the Corporation

NOT A DOCUMENT HERE

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

CSTONE MORTGAGE, INC.

FILE NUMBER: C3021177  
FORMATION DATE: 08/15/2007  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of July 26, 2019.

ALEX PADILLA  
Secretary of State