

Filing fee: \$150.00
License fee: \$15.00 minimum
(Section 7-1.1-124)



State of Rhode Island and Providence Plantings

**OFFICE OF THE SECRETARY OF STATE
CORPORATIONS DIVISION**

BUSINESS CORPORATION

Corp. I.D. #

1001165

**APPLICATION FOR
CERTIFICATE OF AUTHORITY
OF**

Provident Funding Group, Inc.

To the Secretary of State
of the State of Rhode Island

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the undersigned 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:

FIRST: The name of the corporation is Provident Funding Group, Inc.

SECOND: The name which it elects to use in Rhode Island is
Provident Funding Group, inc.

(If the name of the corporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation of one of such words, insert the name of the corporation with the word or abbreviation which it elects to add thereto for use in Rhode Island.)

THIRD: It is incorporated under the laws of California

FOURTH: The date of its incorporation is 10/30/91 and the period
of its duration is Perpetual

FIFTH: The address of its principal office in the state or country under the laws of which it is
incorporated is 1633 Bayshore Highway, Suite 155, Burlingame, CA 94010

SIXTH: The address of its proposed registered office in Rhode Island is
170 Westminster Street, Suite 900, Providence, RI 02903 and the name of its proposed registered agent in
Rhode Island at that address is Corporation Service Company

Corporation Service Company

By:

Signature

SEVENTH: The purpose or purposes which it proposes to pursue in the transaction of business
in Rhode Island are Mortgage Banking

EIGHTH: The names and respective addresses of its directors and officers are:

<u>Name</u>	<u>Office</u>	<u>Address</u>
See Attached	Director	
	Director	
	Director	
	President	
	Vice President	
	Secretary	
	Treasurer	

NINTH: 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 per Share or Statement that Shares are without Par Value</u>
1000	A		\$1.00

TENTH: The aggregate number of its issued shares, 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 per Share or Statement that Shares are without Par Value</u>
100	A		\$1.00

ELEVENTH: An estimate of the value of all property to be owned by it for the following year, wherever located, is \$ 5,000,000.00

TWELFTH: An estimate of the value of its property to be located within Rhode Island during such year is \$ 0.00

THIRTEENTH: An estimate of the gross amount of business to be transacted by it during such year is \$ 450,000

FOURTEENTH: An estimate of the gross amount of business to be transacted by it at or from places of business in Rhode Island during such year is \$ -0-

FIFTEENTH: This Application is accompanied by a copy of its articles of incorporation and all amendments thereto, duly authenticated by the proper officer of the state or country under the laws of which it is incorporated.

ATTACHMENT "A"
NAME AND ADDRESS OF THE DIRECTORS AND OFFICERS OF
PROVIDNET FUNDING GROUP, INC

Name	Title % Owned	Residence	SS/EIN #
Ralph Pica	Chairman Director	2661 Beach Rd. #P-23 Watsonville Monterey County CA 95076	087-26-9237
R. Craig Pica	President Director	2715 St. Giles Mountain View San Mateo County CA 94040	570-41-2801
Douglas Pica	Senior Vice President Director	140 Park Ave. San Carlos San Mateo County CA 94070	568-35-0326
Michelle Blake	Senior Vice President Director	875 Palomar Dr. Redwood City San Mateo County CA 94062	546-17-7292

Dated March 3
~~February 26~~, 1998

Provident Funding Group, Inc.
(Exact Corporate Name of Corporation Making Application)

By Michelle Blake
Its Vice President
and Gerard A. McDonnell
Its Asstn. Secretary

STATE OF California }
COUNTY OF San Mateo } Sc.

AT 1633 Bayshore Hwy, Burlingame in said County on the 3rd day
of March 19 98, before me personally appeared Michelle C. Blake &
Gerard A. McDonnell, who being by me first duly sworn, declared that they are
xxx the Secretary & Vice President of Provident Funding Group, Inc.,
that they signed the foregoing document as such Secretary & Vice President of the
corporation, and that the statements therein contained are true.

/s/

Notary Public

(NOTARIAL SEAL)

FILED

APR 20 1998

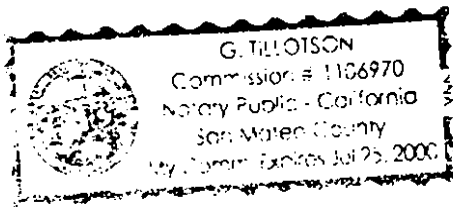
By MD 202337

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RECEIVED
SECRETARY OF STATE
APR 20 1998

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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



☒ personally known to me – OR – ☐ proved to me on the basis of satisfactory evidence to be the person whose name 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 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: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

Signer's Name: _____

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

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
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PROVIDENT FUNDING ASSOCIATES

State of Rhode Island and Providence Plantations
Office of the Secretary of State
Corporations Divisions
100 North Main Street
Providence, Rhode Island, 02903-1335

April 1, 1998


RE: Provident Funding Group, Inc. Application for Certificate of Authority

Dear Sirs:

Provident Funding Group, Inc. is the General Partner of Provident Funding Associates, L. P. a registered foreign Limited Partnership, and is wholly owned by the limited partners of Provident Funding Associates, L. P. As such, the Limited Partnership by this letter consents to the use in Rhode Island of the name Provident Funding Group, Inc.

If there are any question regarding this matter please contact the undersigned at (650) 652-1300.

Sincerely,



Gerard A. McDonnell
General Counsel



SECRETARY OF STATE



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

That the attached transcript of 4 page(s) was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this

MAR 20 1998



Bill Jones

Secretary of State