

LLC-12

22-A58727

FILED

In the office of the Secretary of State of the State of California

JAN 28, 2022

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IMPORTANT — This form can be filed online at <u>bizfile.sos.ca.gov</u>.

Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the **exact** name of the LLC. If you registered in California using an alternate name, <u>see instructions</u>.)

CREDITEASE URBANITE, LLC

2. 12-Digit Secretary of State Entity Number

3. State, Foreign Country or Place of Organization (only if formed outside of California)

202116210928

DELAWARE

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1 Sansome Street, Suite 2080	San Francisco	CA	94104
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1 Sansome Street, Suite 2080	San Francisco	CA	94104
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1 Sansome Street, Suite 2080	San Francisco	CA	94104

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	e		Suffix
b. Entity Name - Do not complete Item 5a Urbanite Capital, LLC					
c. Address	City (no abbre	viations)	State	Zip Co	de
1 Sansome Street, Suite 3670	San Francisco	San Francisco		94104	

INDIVIDUA	AL – Complete Items 6a and 6b only. Must incl	ude ag	ent's full name ar	nd California	a street a	ddress		
a. California Age	ent's First Name (if agent is not a corporation)	Midd	e Name	Last Name			Suffix	
Mark				Jorgensen				
b. Street Addres	, ,		City (no abbreviations)		State	Zip Co	ode	
1 Sansome Stree	ansome Street, Suite 2080		San Francisco		CA	94104	94104	
CORPORA	TION – Complete Item 6c only. Only include the	he nam	e of the registere	ed agent Co	rporation	1.		
c. California Reg	gistered Corporate Agent's Name (if agent is a o	corpora	tion) – Do not co	mplete Item	6a or 6k)		
7. Type of Bu	siness							
Describe the typ	e of business or services of the Limited Liability	y Comp	any					
Real Estate Ler	nding & Investment							
8. Chief Exec	utive Officer, if elected or appointed							
a. First Name		Midd	lle Name Last Name			Suffix		
b. Address		1	City (no abbreviations)		State	ze Zip Code		
9. Labor Judo	gment				1			
of Labor Stand	er or Member have an outstanding final jud ards Enforcement or a court of law, for whi e violation of any wage order or provision o	ich no	appeal therefro		☐ Ye	es 🗜	☑ No	
	, I affirm under penalty of perjury that the in I by California law to sign.	nforma	tion herein is tr	ue and cor	rect and	I that I	am	
01/28/2022	Hunter Rosenbaum		Senior Accoun	ıtant				
Date	Type or Print Name		Title	Signature				

6. Service of Process (Must provide either Individual **OR** Corporation.)