

Filing Fee: \$150.00

ID Number: 149437



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

05 JUL 20 AM 11:06

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:
Arbor Commercial Funding, LLC
2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of New York
4. The date of its organization is 3/29/2005
5. The period of duration of the limited liability company is (if perpetual, so state) perpetual
6. The address of the limited liability company's resident agent in Rhode Island is:
10 Weybosset Street Providence, RI 02903
(Street Address, not P.O. Box) (City/Town) (Zip Code)
and the name of the resident agent at such address is C T Corporation System
(Name of Agent)
7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.
8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:
333 Earle Ovington Blvd., Suite 900, Uniondale, NY 11553
9. The mailing address for the limited liability company is:
Attn: Andrew Pettersen, Esq., 333 Earle Ovington Blvd., Suite 900, Uniondale, NY 11553

FILED
JUL 20 2005
By [Signature]
72206

10 Management of the Limited Liability Company:

- A. The limited liability company is to be managed ☒ by its members. *(If you have checked this box, go to Item no. 11.)*

or

- B. The limited liability company is to be managed ☐ by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

<u>Manager</u>	<u>Address</u>

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

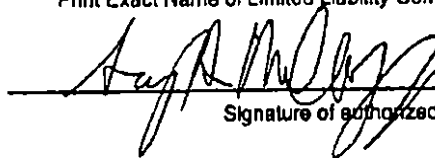
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 7/14/2005

Arbor Commercial Funding, LLC

Print Exact Name of Limited Liability Company Making Application

By



Signature of authorized person

State of New York
Department of State } **ss:**

I hereby certify, that ARBOR COMMERCIAL FUNDING, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/29/2005, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 18th day of July
two thousand and five.*

A handwritten signature in black ink, appearing to read "R. A. D. S.", is written over a horizontal line.

Secretary of State