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MAY 2 0 2014) BRUCI



ACCOUNT NO. : I2000000195

REFERENCE :

139785

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 19, 2014

ORDER TIME : 2:59 PM

ORDER NO. : 139785-005

CUSTOMER NO: 7527475

DOMESTIC FILING

NAME: SILVER B2B FUNDING, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION

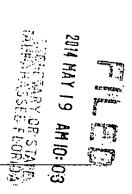
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray - EXT. 62925

EXAMINER'S INITIALS:



COVER LETTER

	Division of Corporations		
	Silver B2B Funding, LLC		•
SUBJECT	Name of L	imited Liability Company	
The enclos	sed Articles of Organization and fee(s)	are submitted for filing.	
Please retu	urn all correspondence concerning this	matter to the following:	
• •	Patricia A. Costa		, ,
		Name of Person	
	Silver Companies		
		Firm/Company	
	1001 E Telecom Dr		
		Address	
	Boca Raton FL 33431		
	pcosta@silverco.com	City/State and Zip Code	
	E-mail address:	(to be used for future annual report notification)	
For further	r information concerning this matter, pl	lease call:	
Patty Cos	sta at i	561 981-5252	.Eb. aa
	Name of Person	Area Code Daytime Telephone Number	
Enclosed i	s a check for the following amount:		
\$125.00 F	siling Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy Certificate of Certified Copy (additional copy is enclosed)	Status & T
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limi	: ited Liability Company is	:			
Silver B2B Funding					
	(Must end with the words	s "Limited Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Addr The mailing address a		orincipal office of the Limited	Liability Company is:		
Principal Office Add	iress:	Mailing Address:		•	
1001 E Telecom Dr Boca Raton FL 33		1001 E Teleco Boca Raton F		·	•
The Limited Liability another business enti				individual or	
	Corporation Service				
	Corporation dervice	Name			
	4004 Have Charact	• • • • • • • • • • • • • • • • • • • •			
	1201 Hays Street	(P.O. Box NOT acceptable)			
٠.				:	
	Tallahassee City	FL 32301 Zip		•	
	City	٠. كال	,		,
the place designat capacity. I further a	ed in this certificate, I her agree to comply with the p am familiar with and acc	accept service of process for i reby accept the appointment as provisions of all statutes relating the obligations of my posit Chapter 605, F.S.	s registered agent and a ng to the proper and co	agree to act in i mplete perform	this nance
	Corporation Servi			~~·	
	By: Haryle	Harry Asst. Vio	B. Davis e President	III. MAY I	COMPANIE AND STREET
•	. (Cc	ONTINUED)		3.35° € 7.00°	li G
	• .	Page 1 of 2	,		

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Silver Capital Advisors, Inc.	
	1001 E Telecom Dr	
	Boca Raton FL 33431	
	Dod Hator 12 do 101	 .
		•
		
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•		
·.		 .
		
	•	
	of filing: (OPTIONAL) scific and cannot be more than five business days prior to o	or 90 days
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.)		or 90 days
E V: Effective date, if other than the date ective date is listed, the date must be spot filling.) E VI: Other provisions, if any.		or 90 days
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ARTICLE IV-