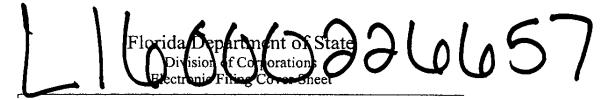
Division of Corporations

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : AKERMAN LLP - MIAMI

Account Number: 075471001363

Phone

: (305)374-5600 : (305) 374-5095

Enter the email address for this business entity to be used for fulfi) annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. LEHMAN LENDING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF LEHMAN LENDING, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is: LEHMAN LENDING, LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

> 20191 East Country Club Drive TS-7 Aventura, Florida 33180

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

> Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

> Corporation Service Company, Registered Agent

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ARTICLE IV: - Management

The name and address of the person authorized to manage and control the limited liability company is as follows:

Title:

Name and Address:

MGR

Joseph Lehman

20191 East Country Club Drive

TS-7

Aventura, Plorida 33180

on December 12, 2016.

Adam Zwecker, Authorized Signer

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.)

Adam Zwecker
Typed or printed name of signee