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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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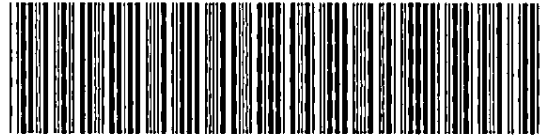
(Business Entity Name)

(Document Number)

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2019 JAN 24 P 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 JAN 24 PM 1:50

1/29/19 75

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 599891 7950209

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : January 23, 2019

ORDER TIME : 9:30 AM

ORDER NO. : 599891-010

CUSTOMER NO: 7950209

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JAN 24 P 8:56

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FOREIGN FILINGS

NAME: SMALL BUSINESS LENDING, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2019

CSC

SUBJECT: SMALL BUSINESS LENDING, LLC
Ref. Number: W19000007851

2019 JAN 24 P 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for SMALL BUSINESS LENDING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$916.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 819A00001788

RECEIVED
19 JAN 29 PM 4:13

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Small Business Lending, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Leah Sanders

Name of Person

Newtek Business Services Corp.

Firm/Company

1981 Marcus Ave., Ste. 130

Address

Lake Success, NY 11042

City/State and Zip Code

lsanders@newtekone.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leah Sanders

212

356-9539

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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2019 JAN 24 P 8:56
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Small Business Lending, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC")

2. New York

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-1293537

(FBI number, if applicable)

4. 1/1/2019

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1981 Marcus Avenue, Suite 130

(Street Address of Principal Office)

Lake Success, NY 11042

6. 1981 Marcus Avenue, Suite 130t

(Mailing Address)

Lake Success, NY 11042

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JAN 24 P 8:56
TALLAHASSEE, FLORIDA

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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida 32301

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Roxanne Turner
Corporation Service Company

(Registered agent's signature)

Roxanne Turner
Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

President and Sec.

Barry Sloane

1981 Marcus Ave., Ste. 130
Lake Success, NY 11042

Chief Operating Off.

Peter Downs

1981 Marcus Ave., Ste. 130
Lake Success, NY 11042

Assistant Secretary

Michael Schwartz

1981 Marcus Ave., Ste. 130
Lake Success, NY 11042

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.

Barry Sloane
Signature of an authorized person

Barry Sloane

Typed or printed name of signer

State of New York Department of State } ss:

I hereby certify, that SMALL BUSINESS LENDING ACQUISITION, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/25/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment SMALL BUSINESS LENDING ACQUISITION, LLC, changing its name to SMALL BUSINESS LENDING, LLC, was filed 02/01/2016.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 22nd day of January
two thousand and nineteen.*

Whitney Clark
Deputy Secretary of State

201901230703 * 45

2019 JAN 24 P 8:56
DEPT. OF STATE
TALLAHASSEE, FLORIDA

FILED