2021 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 25, 2021
Secretary of State
2795524937CC

DOCUMENT# M04000002198

Entity Name: BARINGS LLC

Current Principal Place of Business:

300 SOUTH TRYON STREET
SUITE 2500
CHARLOTTE, NC 28202

Current Mailing Address:

300 SOUTH TRYON STREET
SUITE 2500
CHARLOTTE, NC 28202 US

FEI Number: 51-0504477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER
Name	CRANDALL, ROGER
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	WARD, ELIZABETH CHICARES
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MEMBER
Name	MM ASSET MANAGEMENT HOLDING, LLC
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	CICCO, SUSAN
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	CORBETT, TIMOTHY M.
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	CRADDOCK, GEOFFREY
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	SECRETARY
Name	CALLOW, AMY
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	FRENO, MICHAEL
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMY CALLOW SECRETARY 08/25/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	MANAGER
Name	MERRITT, SEARS
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202

Title	MANAGER
Name	O'CONNOR, MICHAEL
Address	300 SOUTH TRYON STREET SUITE 2500
City-State-Zip:	CHARLOTTE NC 28202