

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000007427

Entity Name: BAPCC, LLC

Current Principal Place of Business:

100 FEDERAL STREET
BOSTON, MA 02110

Current Mailing Address:

401 N TRYON ST, NC1-021-06-01
CHARLOTTE, NC 28255 US

FEI Number: 04-3423072

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

FILED
Jun 29, 2020
Secretary of State
4970925142CC

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 AUTHORIZED MEMBER
Name BANC OF AMERICA PUBLIC CAPITAL CORP
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title VP
Name HOLMAN, CRYSTAL
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name GAUTHIER, DAVID G
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name MARIJO, KLIMAS
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name HESSELMANN, JOHN P
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name GOULD, JOHN J
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name KARAS, TODD
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

Title MANAGER
Name PULLAN, STEVEN E
Address 401 N TRYON ST, NC1-021-06-01
City-State-Zip: CHARLOTTE NC 28255

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: CRYSTAL HOLMAN

VP

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date