

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000005642

Entity Name: LAKEVIEW HOUSEHOLD INSURANCE SOLUTIONS, LLC

FILED
Apr 26, 2024
Secretary of State
6362170306CC

Current Principal Place of Business:

4425 PONCE DE LEON BLVD.
4TH FLOOR
CORAL GABLES, FL 33146

Current Mailing Address:

4425 PONCE DE LEON BLVD.
4TH FLOOR
CORAL GABLES, FL 33146 US

FEI Number: 36-4927809

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 MGR
Name BAYVIEW MSR OPPORTUNITY CORP.
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title PRESIDENT & CEO
Name PEREZ, ARTURO
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name O'BRIEN, RICHARD
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP & CFO
Name WALLACE, TODD
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP & SECRETARY
Name BOMSTEIN, BRIAN E.
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name EVENSON, BRETT
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name WILLIAMS, MARVIN
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name GLASSNER, ADAM
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

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: BRIAN E. BOMSTEIN

SVP

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title SVP & ASST SECRETARY
Name CARR, THOMAS F.
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name STEINMAN, ALISON
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name PORTUGAL, CARLOS
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name SILBERBERG, DAVID
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP, CO-CONTROLLER
Name MCEWAN, ESTER
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP & CO-CONTROLLER
Name WELFARE, SEAN
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name LOZANO, ERIC
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name CHIMIANTI, ANTONIO
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title FIRST VP
Name BRIGGS, DAVID
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title AVP
Name FERNANDEZ, JOSE
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name BRESLAW, JARED
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP & ASST CONTROLLER
Name O'CONNOR, CHRIS
Address 4425 PONCE DE LEON BLVD.
4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146