

B0800000000088

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEMS
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

Please retain original filing date of submission 4/16

RECEIVED

08 APR 22 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP

Bayview ABS Credit Domestic LP

Certificate of Status	0
Certified Copy	0
Page Count	05 (6)
Estimated Charge	\$1,000.00

W08-9553

J. BRYAN

APR 23 2008

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EXAMINER



April 17, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: BAYVIEW ABS CREDIT DOMESTIC LP
REF: W08000019553FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 16 AM 8:05

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6043.

Joey Bryan
Regulatory Specialist IIFAX Aud. #: H08000098624
Letter Number: 808A00023022***RE-SUBMIT***Please retain original filing
date of submission 4/16

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. BAYVIEW ABS CREDIT DOMESTIC LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

N/A

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. DELAWARE

(State or Country of Formation)

3. APRIL 11, 2008

(Date of Formation)

4. BRIAN E. BOMSTEIN, ESQ.

(Name of Registered Agent for Service of Process)

5. 4425 PONCE DE LEON BVD. 4TH FL.

(Florida street address for Registered Agent)

CORAL GABLES, FL 33146

6. 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: BRIAN E. BOMSTEIN

Signature of Registered Agent

7. 4425 PONCE DE LEON BVD. 4TH FL.

(Principal office address)

CORAL GABLES, FL 33146

8. If limited partnership is a limited liability limited partnership, check box ☒

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 16 AM 8:06

9. SAME

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

#M08000001891
BAYVIEW ABS CREDIT GP LLC
(Name)

4425 PONCE DE LEON BLVD., 4TH FL.
(Street Address)
CORAL GABLES, FL 33146

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
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_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)
_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)

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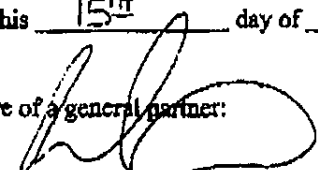
11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 15TH day of APRIL, 20 08

Signature of a general partner:



BRIAN E. BOMSTEIN, AS AUTHORIZED PERSON

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAYVIEW ABS CREDIT DOMESTIC LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAYVIEW ABS CREDIT DOMESTIC LP" WAS FORMED ON THE ELEVENTH DAY OF APRIL, A.D. 2008.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 16 AM 8:08

4533040 8300

080436420

You may verify this certificate online
at corp.delaware.gov/authver.shtml



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6527243

DATE: 04-16-08