

B24000000343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

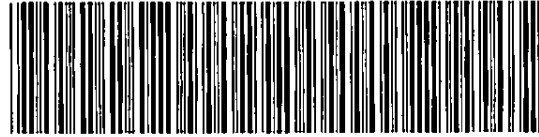
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900438283199

2024 OCT 21 PM 4:21

RECEIVED
2024 OCT 21 PM 3:33
SECRET
FALLENBERRY, CRIDA

OCT 21 2024

K Brumble

FILE 3RD



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 10/21/24
Order #: 1657981-3
Re: Bayview Commercial Real Estate Credit (Us) Master Fund, L.P.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

A handwritten signature in black ink, appearing to read "Amanda Miller", is written over the "TO WHOM IT MAY CONCERN:" line.

Enclosed please find:

Application for Certificate of Authority
Amount to be deducted from our State Account: \$1061.25 - FL State Account Number:
120000000195
Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAYVIEW COMMERCIAL REAL ESTATE CREDIT (US) MASTER FUND, L.P.
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Christine Raymond

Contact Person

c/o Bayview Asset Management, LLC

Firm/Company

4425 Ponce de Leon Blvd.

Address

Coral Gables, FL 33146

City, State and Zip Code

christineraymond@bayview.com

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

For further information concerning this matter, please call:

Marissa Schwartz

at (305) 854-8880

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fee
(\$965 Filing Fee and
\$35 Registered Agent
Fee)
☐ \$1,008.75 Filing Fees
and Certificate of
Status
☐ \$1,052.50 Filing Fees
and Certified Copy
☒ \$1,061.25 Filing Fee,
Certified Copy, and
Certificate of Status

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. Bayview Commercial Real Estate Credit (US) Master Fund, L.P.
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLP.

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.

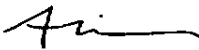
2. State of Delaware 3. September 18, 2024
State or Country of Formation Date of Formation

4. Federal Employer Identification Number: 99-5033800

5. Name of Registered Agent for Service of Process and Florida Street Address:

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

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.



Signature of Registered Agent

7. Principal Office:

4425 Ponce de Leon Blvd.
Coral Gables, FL 33146

8. Mailing Address:

4425 Ponce de Leon Blvd.
Coral Gables, FL 33146

9. If limited partnership is a limited liability limited partnership, check box. ☐

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

Bayview Commercial Real Estate Credit	
Name of General Partner: <u>Fund GP, LLC</u>	Name of General Partner: _____
Street Address: <u>4425 Ponce de Leon Blvd.</u>	Street Address: _____
<u>Coral Gables, FL 33146</u>	_____
Mailing Address: <u>4425 Ponce de Leon Blvd.</u>	Mailing Address: _____
<u>Coral Gables, FL 33146</u>	_____
Name of General Partner: _____	Name of General Partner: _____
Street Address: _____	Street Address: _____
_____	_____
Mailing Address: _____	Mailing Address: _____
_____	_____

Page 1 of 2

Name of General Partner: _____ Name of General Partner: _____
Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 18th day of October, 2024

By: Bayview Commercial Real Estate Credit Fund GP, LLC, its general partner

DocuSigned by: Brian Bomstein, Authorized
By: Brian Bomstein Signatory & Sr. Vice President
Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

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

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAYVIEW COMMERCIAL REAL ESTATE CREDIT (US) MASTER FUND, L.P." 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 TWENTY-FIRST DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAYVIEW COMMERCIAL REAL ESTATE CREDIT (US) MASTER FUND, L.P." WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



5152512 8300

SR# 20243994946

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204675015

Date: 10-21-24