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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE

T. Suron JAN 2 Q ZIM

ACCOUNT NO. : 12000000195					
REFERENCE : 463163 7387459					
AUTHORIZATION: Spelle was					
COST LIMIT : \$ (125.00					
ORDER DATE : January 15, 2015					
ORDER TIME : 9:56 AM					
ORDER NO. : 463163-005					
CUSTOMER NO: 7387459					
FOREIGN FILINGS  NAME: BAYVIEW RESIDENTIAL CAPITAL, LLC					
XXXX QUALIFICATION (TYPE: <u>LL</u> )					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING					
CONTACT PERSON: Courtney Williams EXT# 62935					
FYAMINED.					

**A** 

#### COVER LETTER

Divisio	on of Corporation	18					
SUBJECT:	Bayview Resid	lential Capital, LL	С				
SOBOLCI.	· · · · · · · · · · · · · · · · · · ·	Name	ofLimited	Liability Company			_
						ansact Business in Florida y company to transact bu	
Please return all	correspondence o	concerning this matt	ter to the f	ollowing:			
	Brian E. Bon	nstein					
			Nan	ne of Person			•
	Bayview Ass	set Management, L				, <del>= 11 =</del>	
			Fire	n/Company			
	4425 Ponce	ie Leon Blvd., 5th	Floor				_
				Address		•	
	Coral Gables	, Florida 33146				<u></u>	_
			City/Stat	e and Zip Code			
	christinerayn	nond@bayviewass	etmanago	ement.com			
•		E-mail address: (t	o be used f	or future annual rep	ort notifica	ation)	<del>-</del>
For further infor	mation concerning	this matter, please	call:				
	Christina Day	mond		205	241 556	26	
	Christine Ray Name of	Contact Person		at ( 305 Area Code	341-559 Day	ytime Telephone Number	<del></del>
Divisior	NG ADDRESS: n of Corporations ation Section x 6327	•	Division on Registration But Clifton But C	U			
Tallahas	ssee, FL 32314			outive Center Circ e, FL 32301	le		
		llowing amount					
<b>□\$</b> 125.	00 Filing Fee	☐ \$130.00 Filing I Certificate of St		S155,00 Filing Certified Copy		☐ \$160.00 Filing Fee, 0 of Status & Certified	

TO:

Registration Section

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alt iability Company," "L.L.C,"		of transacting business in Florida. The altern	nate name must include "Limite
Delaware		3. 47-2598413	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if a	ipplicable)
		,	₹.c. <u></u>
	(Date first transacted busines (See sections 605.0904 & 605.0	s in Florida, if prior to registration.) 1905, F.S. to determine penalty liability)	ECANE S
4425 Ponce de Leo	n Blvd., 5th Floor, Coral Gables	s, Florida 33146	3 -
			6. R
	(Sireet ∧do	iress of Principal Office)	-177
4425 Ponce de Leor	Blvd., 5th Floor, Coral Gables	, Florida 33146	7. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
			57 m
<u>,</u>	72.4		
·	apacity and address of the p	person(s) who has/have authority to	_
·	apacity and address of the p		_
·	apacity and address of the p	person(s) who has/have authority to	_
Attached is an origin ving custody of recorceptable. If the certification be submitted)	apacity and address of the p ng, LLC, Manager, 4425 Ponce al certificate of existence, n ds in the jurisdiction under cate is in a foreign language	o more than 90 days old, duly authority the law of which it is organized. (e., a trunslation of the certificate unif an authorized person	henticated by the official A photocopy is not noder oath of the translat
Attached is an origin ving custody of recorceptable. If the certificate be submitted)	apacity and address of the p ng, LLC, Manager, 4425 Ponce al certificate of existence, n ds in the jurisdiction under cate is in a foreign language  Signature of	o more than 90 days old, duly auther law of which it is organized. (e., a trunslation of the certificate ur	henticated by the official A photocopy is not noder oath of the translativity that the facts stated heroin ar

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is:     Bayview Residential Capital, LLC			
If unavailable, the alternate to be used in the state of Florida is:	,		
2. The name and the Florida street address of the registered agent and office are:		<del></del>	
Corporation Service Company	TAL TAL	15	
(Name)	L CR	-	CL
1201 Hays Street	ETA!	JAN 16	e të
Florida Street Address (P.O. Box NOT ACCEPTABLE)	333	- TD	1
Tallahassee, Florida 32301	)f STA , FLOF	H 1:5	Ţ.
City/State/Zip		SU SU	
Having been named as registered agent and to accept service of process for the above st liability company at the place designated in this certificate, I hereby accept the appointn registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familian accept the obligations of my position as registered agent as provided for in Chapter 605 Statutes.  Courtney William Asst. Vice Pres	nent as ovisions of r with and , Florida ams	all	

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

Certificate of Status (optional)

5.00

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BAYVIEW RESIDENTIAL CAPITAL, LLC"

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 JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAYVIEW RESIDENTIAL CAPITAL, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF DECEMber, A.D. 2014.

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

5660810 8300

150060962

AUTHENTACATION: 2044629

DATE: 01-16-15

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