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K SALY DEC 17 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 543038 8257246

AUTHORIZATION : Corrello de

COST LIMIT : \$ 125 00

ORDER DATE: December 14, 2018

ORDER TIME : 2:48 PM

ORDER NO. : 543038-010

CUSTOMER NO: 8257246

FOREIGN FILINGS

NAME: BAYPORT FUNDING LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:

TO: R D	egistration Section ivision of Corpora	tions		
SUBJECT	BAYPORT FUN	DING LLC		
		Name o	of Limited Liability Compan	у
The enclose Existence, a	ed "Application by I and check are submi	Foreign Limited Liability Co itted to register the above ref	mpany for Authorization to erenced foreign limited liabi	Transact Business in Florida," Certifica lity company to transact business in Fl
lease retur	m all correspondenc	e concerning this matter to the	ne following:	
	AUDRA HO	RNIG, ESQ.		
			Name of Person	
	LAW OFFIC	E OF LAWRENCE ANDE	LSMAN, PC	
			Firm/Company	
	98 CUTTER	MILL ROAD, SUITE 462S		
			Address	
	GREAT NEC	CK, NY 11021		
		City/	State and Zip Code	
	AUDRA@AN	DELSMANLAW.COM		
		E-mail address: (to be use	ed for future annual report no	otification)
or further in	nformation concerni	ng this matter, please call:		
AU	JDRA@ANDELSM	ANLAW.COM	516 625-9	200
	Name	of Contact Person	Area Code Da	ytime Telephone Number
Divi Reg P.O.	ILING ADDRESS ision of Corporation istration Section . Box 6327 ahassee, FL 32314	<u>:</u> s	Division Registra Clifton E 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301
nclosed is a	check for the follow 125.00 Filing Fee	ving amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

ame unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited Li	ability Company," "L.L.C," or "LLC."	
NEW YORK		3. 45-3655786		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration) ne penalty hability)		
98 CUTTERMILL RC		6. 98 CUTTERMIILL ROAI		
SUITE 424N	Principal Office)	(Mailing Address) SUITE 424N		
GREAT NECK, NY 1	1021	GREAT NECK NY 11021		
			日	
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	DEC 14	
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			
Office Address:				
	Tallahassee (City)	, Florida 32301		
	of my position as registered agent. Corporation Service Company By: (Registered agent's significance)	and complete performance of my a	Roxanne Turne Asst. Vice Presid	
	Corporation Service Company By:	Quinte)	Roxanne Turne Asst. Vice Presid	
The name, title or capac	Corporation by ice impany By: (Registered agent's significant and address of the person(s) who has	gnature) Thave authority to manage is/are:	Roxanne Turne	
The name, title or capac	Corporation Sovice Company By: (Registered agent's signification of the person(s) who has Name and Address: MIRA BAR-MASHIH 98 CUTTERMILL ROAD	gnature) Thave authority to manage is/are:	Roxanne Turne Asst. Vice Presid	
The name, title or capacity:	Corporation Sovice Company By: (Registered agent's signification of the person(s) who has Name and Address: MIRA BAR-MASHIH 98 CUTTERMILL ROAD SUITE 424N	gnature) Thave authority to manage is/are:	Roxanne Turne Asst. Vice Presid	
The name, title or capace Title or Capacity: MEMBER	Corporation by ice impany By: (Registered agent's significant of the person(s) who has name and Address: MIRA BAR-MASHIH 98 CUTTERMILL ROAD SUITE 424N GREAT NECK, NY 11021	gnature) Thave authority to manage is/are:	Roxanne Turne Asst. Vice Presid	
The name, title or capace Title or Capacity: MEMBER e attachments if necessar	Corporation by ice impany By: (Registered agent's significant of the person(s) who has name and Address: MIRA BAR-MASHIH 98 CUTTERMILL ROAD SUITE 424N GREAT NECK, NY 11021	gnature) Thave authority to manage is/arc: Title or Capacity:	Roxanne Turne Asst. Vice Presid	
The name, title or capacity: Title or Capacity: MEMBER Tatachments if necessare attached is a certificate of diction under the law of	Corporation by ice impany By: (Registered agent's significant of the person of the pe	pnature) //have authority to manage is/arc: Title or Capacity:	Roxanne Turne Asst. Vice Presid Name and Address:	
The name, title or capacity: Title or Capacity: MEMBER Take attachments if necessal attached is a certificate of soliction under the law of the translator must be substituted to the substitute of the translator must be substituted to the translator must be	Corporation by ice impany By: (Registered agent's significant of the person of the pe	gnature) //have authority to manage is/are: Title or Capacity: ally authenticated by the official have is in a foreign language, a translation.	Name and Address:	
The name, title or capacity: Title or Capacity: MEMBER Tached is a certificate of sdiction under the law of the translator must be substituted to succeed the substitute of the translator must be substituted to the trans	Corporation by ice impany By: (Registered agent's significant of the person of the pe	gnature) Thave authority to manage is/are: Title or Capacity: Ally authenticated by the official havis in a foreign language, a translation is in a foreign language. I am aware it degree felony as provided for in s.	Name and Address:	
The name, title or capacity: Title or Capacity: MEMBER Tached is a certificate of sdiction under the law of the translator must be substituted to succeed the substitute of the translator must be substituted to the trans	Corporation by ice impany By: (Registered agent's significant of the person of the pe	gnature) //have authority to manage is/are: Title or Capacity: ally authenticated by the official have is in a foreign language, a translation.	Name and Address:	

State of New York Department of State } ss:

I hereby certify, that BAYPORT FUNDING LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/20/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department.



201812140792 + 45

Witness my hand and the official seal of the Department of State at the City of Albany, this 13th day of December two thousand and eighteen.

Whitney Clark

Deputy Secretary of State