

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000029

Entity Name: BAYVIEW LENDING GROUP HOLDINGS LLC**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**FEI Number:** 20-8205181**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOMSTEIN, BRIAN E
4425 PONCE DE LEON BLVD., 4TH FLOOR
CORAL GABLES, FL 33146 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 MGRP
Name QUINT, DAVID
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVPS
Name BOMSTEIN, BRIAN E
Address 4425 PONCE DE LEON BLVD 4TH FL
City-State-Zip: MIAMI FL 33146

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

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

Title CEO
Name ERTEL, DAVID
Address 4425 PONCE DE LEON BLVD 4TH FL
City-State-Zip: MIAMI FL 33146

Title SVP
Name O'BRIEN, RICHARD
Address 4245 PONCE DE LEON BLVD 4TH FL
City-State-Zip: MIAMI FL 33146

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

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

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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****04/17/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

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

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