2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2018
Secretary of State
CC4045848978

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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	FIRST 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 04/11/2018

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