

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000001714

Entity Name: BAYVIEW ASSET MANAGEMENT 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 US**FEI Number:** 47-3055075**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 MGR
Name MAYIM CAPITAL, LLC
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP & COO
Name O'BRIEN, RICHARD
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

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

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

Title PCEO
Name ERTEL, 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 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

Title SVP
Name GLASSNER, ADAM
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****04/23/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

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

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

Title FIRST VP
Name BRIGGS, DAVID
Address 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

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

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

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

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

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