Entity Name: LAKEVIEW HOUSEHOLD INSURANCE SOLUTIONS, LLC

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

4425 PONCE DE LEON BLVD. 4TH FLOOR CORAL GABLES, FL 33146

DOCUMENT# M1900005642

Current Mailing Address:

4425 PONCE DE LEON BLVD. 4TH FLOOR CORAL GABLES, FL 33146 US

FEI Number: 36-4927809

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title	MGR	Title	PRESIDENT & CEO
Name	BAYVIEW MSR OPPORTUNITY CORP.	Name	PEREZ, ARTURO
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	SVP	Title	SVP & CFO
Name	O'BRIEN, RICHARD	Name	WALLACE, TODD
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	SVP	Title	SVP
Name	BOMSTEIN, BRIAN E.	Name	EVENSON, BRETT
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	SVP	Title	SVP
Name	WILLIAMS, MARVIN	Name	GLASSNER, ADAM
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146

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SVP

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

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 28, 2025 Secretary of State 8257766050CC

04/28/2025

Date

Authorized Person(s) Detail Continued :

Title	SVP & ASST SECRETARY	Title	SVP
Name	CARR, THOMAS F.	Name	STEINMAN, ALISON
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	SVP	Title	SVP
Name	CHIMIENTI, ANTONIO	Name	PORTUGAL, CARLOS
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	FIRST VP	Title	VP
Name	BRIGGS, DAVID	Name	SILBERBERG, DAVID
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	AVP	Title	SVP, C0-CONTROLLER
Name	FERNANDEZ, JOSE	Name	MCEWAN, ESTER
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	VP	Title	VP & CO-CONTROLLER
Name	BRESLAW, JARED	Name	WELFARE, SEAN
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	VP & ASST CONTROLLER	Title	SVP
Name	O'CONNOR, CHRIS	Name	POST, JENNIFER J.
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	SVP	Title	SVP & SECRETARY
Name	LINDOW, VANESSA	Name	BENDALIN, RONALD
Address	4425 PONCE DE LEON BLVD. 4TH FLOOR	Address	4425 PONCE DE LEON BLVD. 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146