No. W 92098		Annual Report Form 1. Mailing Address: Correct in this box if needed. FIRSTSOURCE SOLUTIONS USA, LLC JENNIFER TRUEBLOOD 1661 LYNDON FARM COURT LOUISVILLE KY 40223		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	FIRSTSOU JENNIFER 1661 LYND			NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
Office Held Name		esses of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
	I WINTERS	1661 LYNDON FARM COURT	LOUISVILLE	KY	USA	40223	
5. Organized Under the Laws of DE W 92098	Signature	ual Report must be signed.* ature: Jennifer Trueblood Date: 02/11/2014 e (type or print): Jennifer Trueblood Title: Director					
Processed 02/11/2014	* Electronical	* Electronically provided signatures are accepted as original signatures.					