State of Idaho

Office of the Secretary of State

CERTIFICATE OF AUTHORITY

OF

ALTISOURCE SINGLE FAMILY, INC

File Number C 200655

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 24, 2013



Ben yeura



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2013 DEC 24 AM 11:3

SECRETARY OF STATE STATE OF IDAHO

Th	e undersigned Corporation applies for	a Certificate of Autho	rity and states as follows:		
1.	The name of the corporation is:				
	Altisource Single Family, Inc.				
2.	The name which it shall use in Idaho	is:		· .	
3.	It is incorporated under the laws of:	Delaware			
4.	Its date of incorporation is: 02/10/20	012	_		
5.	The address of its principal office is:				
	2002 Summit Blvd., Suite 600, Atlanta	a, GA 30319		<u></u>	
6.	The address to which correspondence should be addressed, if different from item 5, is:				
7.	· · · · · · · · · · · · · · · · · · ·				
	and its registered agent in Idaho at the	nat address is: CTC	orporation System		
8.	The names and respective business	addresses of its direc	tors and officers are:		
8.	The names and respective business	addresses of its direc	tors and officers are: Business Address		
8.					
8.	Name				
8.	Name				
8.	Name				
8.	Name				
8.	Name				
8.	Name				
8.	Name		Business Address		
	Name		Business Address Customer Acct #:		
Da	Name SEE ATTACHMENT		Customer Acct #: (Tusing pre-paid account) Secretary of State use of	only	
Da [*] Sig	SEE ATTACHMENT ed:	Title	Customer Acct #:	only	

IDAHO SECRETARY OF STATE 12/24/2013 05:00 CK: NONE CT: 278665 BH: 1403899 1 0 180.80 = 186.90 AUTH PRO # 2

[The signer must be a director or an officer of the corporation.]

ALTISOURCE SINGLE FAMILY, INC.

Name	<u>Title</u>	<u>Address</u>
Joseph A. Davila	Director	291, route d'Arlon, Luxembourg City, Luxembourg L-1150
Michelle D. Esterman	Director	291, route d'Arlon, Luxembourg City, Luxembourg L-1150
Kevin J. Wi lcox	Director	291, route d'Arlon, Luxembourg City, Luxembourg L-1150
Jason C. Kirkley	President	2002 Summit Blvd., Suite 600, Atlanta, Georgia 30319
C. Martin Cliff	Treasurer	2002 Summit Blvd., Suite 600, Atlanta, Georgia 30319
Melissa M. Potier	Assistant Vice President	2002 Summit Blvd., Suite 600, Atlanta, Georgia 30319
Stephen J. Rinderle	Assistant Vice President	2002 Summit Blvd., Suite 600, Atlanta, Georgia 30319
F. Brian Schneiderman	Secretary	2002 Summit Blvd., Suite 600, Atlanta, Georgia 30319

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ALTISOURCE SINGLE FAMILY, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS

THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF

DECEMber, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

5108083 8300

131472811

You may verify this certificate online at corp.delaware.gov/authver.shtml

DATE: 12-24-13

AUTHENTY CATION: 1010427