No. <b>C 190908</b>		Due no later than Apr 30, 2013 Annual Report Form		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:					C T CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ALTISOURCE FULFILLMENT OPERATIONS, INC.  TWO CITY PLACE, SUITE 90  ST. LOUIS MO 63141			921 S ORCHARD ST STE G BOISE ID 83705 USA			
				USA				
				3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
		(ALTENRIEDER	TWO CITY PLACE, SUITE 30	ST. LOUIS	MO	USA	63141	
PRESIDENT TIMOTHY C.			TWO CITY PLACE, SUITE 30	ST. LOUIS	MO	USA	63141	
SECRETARY	MICHAEL D.	PERETZ	TWO CITY PLACE, SUITE 30	ST. LOUIS	МО	USA	63141	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Laura Louis			Date: 04/13/2013			
C 190908		Name (type or print): Laura Louis			Title: Poa			
Processed 04/13/2013 * Electronically provided signatures are accepted as original signatures.								