

# State of Idaho

Office of the Secretary of State

**CERTIFICATE OF AUTHORITY  
OF  
ALTISOURCE FULFILLMENT OPERATIONS, INC.**

File Number C 190908

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: April 25, 2011



*Ben Yursa*

SECRETARY OF STATE

By

*[Signature]*



# APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

11 APR 25 PM 4:00

SECRETARY OF STATE  
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

- The name of the corporation is:  
Altisource Fulfillment Operations, Inc.
- The name which it shall use in Idaho is: \_\_\_\_\_
- It is incorporated under the laws of: Delaware
- Its date of incorporation is: 01/11/2011
- The address of its principal office is:  
2002 Summit Blvd., Suite 600, Atlanta, GA 30319
- The address to which correspondence should be addressed, if different from item 5, is:  
\_\_\_\_\_
- The street address of its registered office in Idaho is: 1111 West Jefferson, Suite 530, Boise, Idaho 83702  
and its registered agent in Idaho at that address is: CT Corporation System
- The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>William B. Shepro</u>	<u>Director</u>	<u>291 route d Arlon, L-1150 Luxembourg</u>
<u>Timothy C. Stern</u>	<u>Vice President</u>	<u>Two City Place, Suite 30, St. Louis, MO 63141</u>
<u>Michael D. Peretz</u>	<u>Vice President/Secretary</u>	<u>Two City Place, Suite 30, St. Louis, MO 63141</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 4/12/2011

Signature: *[Handwritten Signature]*

Typed Name: Michael D. Peretz

Capacity: Secretary  
*(The signer must be a director or an officer of the corporation.)*

Customer Acct # : \_\_\_\_\_  
(if using pre-paid account)

Secretary of State use only

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Revised 10/2006

IDAHO SECRETARY OF STATE  
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C190908

# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALTISOURCE FULFILLMENT OPERATIONS, 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-FIRST DAY OF APRIL, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8711037

DATE: 04-21-11