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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------|---------|-------------|
| No. <b>C 190908</b>                                                                                                                                    |                     | <b>Due no later than Apr 30, 2014</b>                                                                                                                                                                                |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>                        |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                     | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>ALTISOURCE FULFILLMENT OPERATIONS, INC.<br>13736 RIVERPORT DRIVE<br>SUITE 420<br>MARYLAND HEIGHTS MO 63043-4820<br>USA |           | C T CORPORATION SYSTEM<br>921 S ORCHARD ST STE G<br>BOISE ID 83705<br>USA |         |             |
|                                                                                                                                                        |                     |                                                                                                                                                                                                                      |           | 3. <u>New</u> Registered Agent Signature:*                                |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                     |                                                                                                                                                                                                                      |           |                                                                           |         |             |
| Office Held                                                                                                                                            | Name                | Street or PO Address                                                                                                                                                                                                 | City      | State                                                                     | Country | Postal Code |
| SECRETARY                                                                                                                                              | DEBORA J. AYDELOTTE | 2 CITYPLACE DRIVE, SUITE 30                                                                                                                                                                                          | ST. LOUIS | MO                                                                        | USA     | 63141       |
| TREASURER                                                                                                                                              | DEBORA J. AYDELOTTE | 2 CITYPLACE DRIVE, SUITE 30                                                                                                                                                                                          | ST. LOUIS | MO                                                                        | USA     | 63141       |
| PRESIDENT                                                                                                                                              | JEFFREY R MCGUINESS | 2 CITYPLACE DRIVE, SUITE 30                                                                                                                                                                                          | ST. LOUIS | MO                                                                        | USA     | 63141       |
| 5. Organized Under the Laws of:<br><br><b>DE<br/>C 190908</b>                                                                                          |                     | 6. Annual Report must be signed.*<br>Signature: Michelle Donato<br>Name (type or print): Michelle Donato<br><br>Date: 04/01/2014<br>Title: Poa                                                                       |           |                                                                           |         |             |
| Processed 04/01/2014                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                                                                            |           |                                                                           |         |             |