

F14000001831Florida Department of State
Division of Corporations
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To:Division of Corporations
Fax Number : (850) 617-6381**From:**Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368**FILED**
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TALLAHASSEE FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FOREIGN PROFIT/NONPROFIT CORPORATION
ALTISOURCE RESIDENTIAL CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	08
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Altisource Residential Corporation
Name of corporation - must include suffix

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Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Edwina Bernita Robinson
Name of Person
Altisource Asset Management Corporation
Firm/Company
402 Strand Street
Address
Frederiksted, US Virgin Islands 00840-3531
City/State and Zip code
Edwina.Robinson@AltisourceAMC.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edwina Bernita Robinson at (340) 713-7756
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Altisource Residential Corporation

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Maryland

(State or country under the law of which it is incorporated)

3. 46-0633510

(FEI number, if applicable)

4. 07/19/2012

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. c/o Altisource Asset Management Corporation, 402 Strand Street, Frederiksted, VI 00840-3531

(Principal office address)

same

(Current mailing address)

8. SEE ATTACHMENT

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: 

Terrell Kearney Asst. Secretary

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Stephen H. Gray, Secretary _____

(Typed or printed name and capacity of person signing application)

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FLORIDA

**Attachment to Florida
Principal Office Address**

c/o Altisource Asset Management Corporation, 402 Strand Street, Frederiksted, St.
Croix, VI 00840-3531

Purpose Clause

Engaging in business as a Real Estate Investment Trust under the Internal Revenue
Code of 1986, as amended, or any successor statute

Officers & Directors

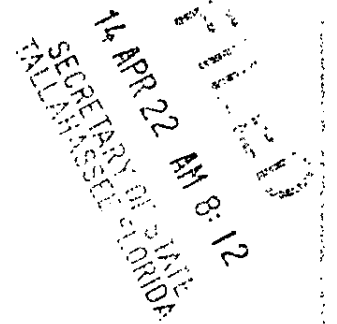
- | | | |
|---|-------------------|-------------------------------|
| 1 | Full Name: | Ashish Pandey |
| | Officer/Director: | Officer |
| | Officer's Title: | Chief Executive Officer |
| | Director's Title: | |
| | Business Address: | 402 Strand Street |
| | City: | Frederiksted |
| | State: | VI |
| | ZIP Code: | 00840-3531 |
| 2 | Full Name: | Stephen H. Gray |
| | Officer/Director: | Officer |
| | Officer's Title: | General Counsel and Secretary |
| | Director's Title: | |
| | Business Address: | 402 Strand Street |
| | City: | Frederiksted |
| | State: | VI |
| | ZIP Code: | 00840-3531 |
| 3 | Full Name: | Kenneth D. Najour |
| | Officer/Director: | Officer |
| | Officer's Title: | Chief Financial Officer |
| | Director's Title: | |
| | Business Address: | 402 Strand Street |
| | City: | Frederiksted |
| | State: | VI |
| | ZIP Code: | 00840-3531 |
| 4 | Full Name: | Salah Saabneh |
| | Officer/Director: | Officer |
| | Officer's Title: | Executive Vice President |
| | Director's Title: | |
| | Business Address: | 402 Strand Street |

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	City:	Frederiksted
	State:	VI
	ZIP Code:	00840-3531
5	Full Name:	William C. Erbey
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	402 Strand Street
	City:	Frederiksted
	State:	VI
	ZIP Code:	00840-3531
6	Full Name:	Robert J. Fitzpatrick
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	402 Strand Street
	City:	Frederiksted
	State:	VI
	ZIP Code:	00840-3531
7	Full Name:	Michael A. Eruzione
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	402 Strand Street
	City:	Frederiksted
	State:	VI
	ZIP Code:	00840-3531
8	Full Name:	James H. Mullen
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	402 Strand Street
	City:	Frederiksted
	State:	VI
	ZIP Code:	00840-3531

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 TALLAHASSEE, FLORIDA

9 Full Name: David B. Reiner
 Officer/Director: Director
 Officer's Title:
 Director's Title: Director
 Business Address: 402 Strand Steet
 City: Frederiksted
 State: VI
 ZIP Code: 00840-3531



STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ALTISOURCE RESIDENTIAL CORPORATION, INCORPORATED JULY 19, 2012, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 18, 2014.



Paul B. Anderson
Charter Division



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097