

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002247

Entity Name: OPORTUN, INC.**Current Principal Place of Business:**2 CIRCLE STAR WAY
SAN CARLOS, CA 94070**Current Mailing Address:**2 CIRCLE STAR WAY
SAN CARLOS, CA 94070 US**FEI Number:** 20-3386325**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, DIRECTOR
Name VAZQUEZ, RAUL
Address 1600 SEAPORT BLVD
STE 250
City-State-Zip: REDWOOD CITY CA 94063

Title DIRECTOR
Name PASCARELLA, CARL
Address 345 CALIFORNIA ST
STE 3300
City-State-Zip: SAN FRANCISCO CA 94103

Title DIRECTOR
Name ALVAREZ, AIDA M.
Address 107 REQUAL ROAD
City-State-Zip: PIEDMONT CA 94611

Title CHIEF CREDIT OFFICER
Name KIRSCHT, PATRICK J.
Address 1600 SEAPORT BLVD. SUITE 250
City-State-Zip: REDWOOD CITY CA 94063

Title CFO
Name COBLENTZ, JONATHAN
Address 1600 SEAPORT BLVD
STE 250
City-State-Zip: REDWOOD CITY CA 94063

Title DIRECTOR
Name STROHM, DAVID
Address 2550 SAND HILL ROAD
STE 200
City-State-Zip: MENLO PARK CA 94025

Title CORPORATE SECRETARY
Name LAYTON, KATHLEEN
Address 2 CIRCLE STAR WAY
City-State-Zip: SAN CARLOS CA 94070

Title DIRECTOR
Name MIRAMONTES, LOUIS
Address 6621 JOHNSTON ROAD
City-State-Zip: PLEASANTON CA 94588

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHLEEN LAYTON**SECRETARY****04/13/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BAREFOOT, JO ANN
Address 2 CIRCLE STAR WAY
City-State-Zip: SAN CARLOS CA 94070

Title GENERAL COUNSEL AND CHIEF COMPLIANCE
OFFICER
Name ARISTEI, JOAN
Address 1600 SEAPORT BLVD
STE 250
City-State-Zip: REDWOOD CITY CA 94063

Title CHIEF MARKETING OFFICER
Name ARMSTRONG, BENJAMIN
Address 2 CIRCLE STAR WAY
City-State-Zip: SAN CARLOS CA 94070

Title DIRECTOR
Name WILLIAMS, NEIL
Address 2 CIRCLE STAR WAY
City-State-Zip: SAN CARLOS CA 94070

Title CHIEF TECHNOLOGY OFFICER
Name NEEDHAM, DAVID
Address 1600 SEAPORT BLVD
STE 250
City-State-Zip: REDWOOD CITY CA 94063

Title CHIEF OPERATIONS OFFICER
Name JENKINS, MATTHEW
Address 2 CIRCLE STAR WAY
City-State-Zip: SAN CARLOS CA 94070