No. W 37241	Due no later than Mar 31, 2011	2. Registered Agent and Office (NOT A P.O.
Return to:	Annual Report Form	CT CORPORATION SYSTEM
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, 1D 83720-0080	1. Mailing Address: Correct in this box if needed. AIG MORTGAGE CAPITAL, LLC DAVID-MILLER 80 P. VIC ST.	1111 W JEFFERSON STE 530 BOISE ID 83702
NO FILING FEE IF RECEIVED BY DUE DATE	30TH FLOOR NEW YORK, NY 10005 NEW YORK NY 10270	3. New Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		
Manager or Member Ham	Street or PO Address	City State Country Postal Code
Manager Member (circle one) A16 Global 455 itoldings	set Management 80 Aue St. Covp.	New York NY 10005
5. Organized Under the Laws o	f: 6. Signature: VI July 5. C	Date: 3/15/11
DELAWARE	The same of the sa	
W 37241	Name (type or print): Patrick M. F	sulle Title: "Secretary
Issued 03/16/2011 by PEH		107102
INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM		
Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1. Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.		
Block 3: Only a new registered agent must sign in Block 3.		
Block 4: Circle either Member or Manager. Enter names and business addresses of managers or members of the limited liability company.Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include the title for each name listed.		
Block 5: May not be altered through the use of this form.		
Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signature.		
** The image of this form will be available on the internet once it has been filed, DO NOT enter Social Security numbers.		
www.sos.idaho.gov. However,	y is no longer doing business in Idaho, you may file the appropriate for if no timely annual report is filed, administrative action will be taken, a any questions contact the Commercial Division at (208) 334-2301.	orm and fee. Forms are available on the website at Tet no cost to the Limited Liability Company to terminate
	POSTMARK DATES WILL NOT BE ACCEPTED	