

No. W 106564	Reinstatement Annual Report Form ADMIN DISSOLVED 12/04/2012		2. Registered Agent and Office (NOT A P.O. BOX) JOHN MILLER 206 INDIANA AVE STE 200 COEUR D ALENE ID 83814																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0060 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ALPHA EQUITY, LLC 212 IRONWOOD DR STE D-141 COEUR D ALENE ID 83814		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager ☒ Member ☐</td> <td>MIKE RAE</td> <td>C/O ALPHA EQUITY, LLC</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td>212 E Ironwood Dr, HP-141, Coeur d'Alene, ID</td> <td></td> <td></td> <td></td> <td>83814</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager ☒ Member ☐	MIKE RAE	C/O ALPHA EQUITY, LLC					Manager ☐ Member ☐		212 E Ironwood Dr, HP-141, Coeur d'Alene, ID				83814	Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 106564		6. Signature:  Name (type or print): MIKE RAE Date: 12/10/12 Title:																																				
Issued 12/11/2012 by LIC																																						