| No. <b>W 34656</b>   |                 | Due no later than Nov 30, 2017  |  | 2. F | 2. Registered Agent and Address (NO PO BOX)                            |       |         |             |
|--|-----------------|---|--|------|--|-------|---------|-------------|
| Return to:   |                 | Annual Report Form  |  |      | STEVE VAUGHT   |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |                 | 1. Mailing Address: Correct in this box if needed.  M453 FIXED INCOME FUND, LLC  STEVE VAUGHT PO BOX 140177 BOISE ID 83714-0177 |  |      | 7971 W MARIGOLD ST BOISE ID 83714  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                 |   |  |      |  |       |         |             |
| 4. Limited Liability Compar  | nies: Enter Nar | mes and Address   | ses of at least one Member or Manager. |      |  |       |         |             |
| Office Held  | Name            |   | Street or PO Address                   | Ci   | ity  | State | Country | Postal Code |
| Manager Alpha Lendi  |                 | NG, LLC   | 7971 W MARIGOLD ST                     | ВС   | DISE   | ID    |         | 83714       |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |  |      |  |       |         |             |
| ID   |                 | Signature: Steve Vaught   |  |      | Date: 09/18/2017   |       |         |             |
| W 34656  |                 | Name (type or print): Steve Vaught  |  |      | Title: Manager   |       |         |             |
| Processed 09/18/2017 * Electronically provided signatures are accepted as original signatures. |                 |   |  |      |  |       |         |             |