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| No. W 34657 | Due no later than Nov 30, 2014 Annual Report Form | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address: Correct in this box if needed. ALPHA MORTGAGE FUND 1, LLC T. WOLFE PO BOX 140177 BOISE ID 83714-0177 | TIMBRE WOLFE 7971 W MARIGOLD ST BOISE 83714 | | | |
| | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country Postal Code |
| MANAGER | ALPHA LENDING, LLC | 7971 W MARIGOLD ST. | BOISE | ID | 83714 |
| 5. Organized Under the Laws of: ID W 34657 | 6. Annual Report must be signed.* Signature: T Wolfe Date: 11/26/2014 Name (type or print): T Wolfe Title: Mngr/Member | | | | |
| Processed 11/26/2014 | | * Electronically provided signatures are accepted as original signatures. | | | |