oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

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

SIGNATURE: MELVIN D FERNANDEZ

Electronic Signature of Signing Authorized Person(s) Detail

04/30/2014 REGISTERED AGENT

DOCUMENT# L13000048593

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: AALPINE LENDING, LLC

Current Principal Place of Business:

1900 HWY. 87 SUITE G NAVARRE, FL 32566

Current Mailing Address:

1900 HWY.87 SUITE G NAVARRE, FL 32566

FEI Number: 38-3902641

Name and Address of Current Registered Agent:

FERNANDEZ, MELVIN D 2515 MASTERS BLVD NAVARRE, FL 32566 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:	: MELVIN D FERNANDEZ			04/30/2014
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	ALEX, RICK	Name	FERNANDEZ, MELVIN D	
Address	7647 PEPPERWOOD ST	Address	1439 NAUTILUS DRIVE	
City-State-Zip:	NAVARRE FL 32566	City-State-Zip:	NAVARRE FL 32566	

FILED Apr 30, 2014

Secretary of State CC9750965163

Certificate of Status Desired: Yes

Date