PAGE PERRY, LLC

1040 CROWN POINTE PARKWAY SUITE 1050

ATLANTA, GEORGIA 30338

(770) 673-0047

Email:bterry@pageperry.com

FACSIMILE (770) 673-0120

January 23, 2013

Dear Potential Claimant:

On September 21, 2012, Judge William S. Duffey, Jr., United States District Judge, appointed Robert D. Terry as Receiver for Angelo A. Alleca, Summit Wealth Management, Inc., Summit Investment Fund LP, Asset Class Diversification Fund, LP, and Private Credit Opportunities Fund, LLC, in the case Securities and Exchange Commission v. Angelo Alleca, et al., Civil Action File Number 1:12-CV-3261-WSD (N.D.Ga). Since that time we have been working to complete the tasks assigned by the Court, including preparing an accounting of the securities offerings sold by the defendants, including their securities offerings. You are receiving this letter and the enclosed claim form because, based upon our review of the defendants and their businesses, it appears you may have invested in one of the named Defendants or may otherwise have a claim against one or more of them.

Please review the claim form carefully. After reviewing it, if you believe that you have a valid claim, please complete the form, and return it to the address below **on or before April 30, 2013**. If your claim arises from goods or services you provided, please also include supporting documentation. A self-addressed envelope is enclosed for your convenience. It is important that you read and follow all of the instructions on the claim form. Failure to submit your claim by the deadline may result in your claim being denied.

You can keep track of the progress of the case by going to the web address www.swmreceivership.com. We will post pleadings and reports to the website as the case proceeds.

Sincerely,

Robert D. Terry

Receiver

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA

SECURITIES AND EXCHANGE COMMISSION

Plaintiff,

v.

Civil Action No. 1:12-CV-3261

ANGELO A. ALLECA, SUMMIT WEALTH MANAGEMENT, INC., SUMMIT INVESTMENT FUND, LP, ASSET DIVERSIFICATION FUND, LP, and PRIVATE CREDIT OPPORTUNITIES FUND, LLC

Defendants.

PROOF OF CLAIM FORM

INSTRUCTIONS

The purpose of this Proof of Claim Form is to determine whether you have a claim against Summit Wealth Management, Inc., Summit Investment Fund, LP, Asset Class Diversification Fund, LP, and/or Private Credit Opportunities Fund, LLC ("Defendants") arising from any investment with, loan to, or other transaction with any of the Defendants or the operations of the Defendants.

If you believe any of the Defendants owes you money because of goods or services provided by you, please complete sections 1, 2 and 4 and return this form by April 30, 2013.

If you believe you are owed money because of a loan to or investment with any of the Defendants, or any reason other than providing goods or services, complete sections 1, 3 and 4 of this form and return it by April 30, 2013.

If you did not provide goods or services for which you were not paid, did not invest with or loan money to these defendants, and do not otherwise have a claim against any of these defendants, you may disregard this form.

You should file this form to report any claim you have against the Defendants arising prior to the date on which it is filed. Your claim should include monies paid to these entities either as a loan or for investment purposes, less refunds, distributions, or other offsets. If you paid any monies to the Defendants for one of those purposes it is very important that you completely and accurately fill out the form and return it **on or before April 30, 2013** to the Court Appointed Receiver in this matter at the following address:

Summit Wealth Management, Inc.- Claims Page Perry, LLC 1040 Crown Pointe Parkway, Suite 1050 Atlanta, Georgia 30338

At this time, please do not submit supporting documentation with your claim, unless your claim is for providing goods or services. If your claim relates to providing goods or services, please submit any invoices or other documentation supporting your claim.

In calculating the amount of your claim, do not include interest, penalties, punitive damages, attorney's fees, or similar charges. Only report the amount invested or loaned, as evidenced by invoices, receipts, confirmations, or statements.

If you fail to return this form to the Receiver on or before April 30, 2013, the Receiver may propose to disallow all or part of the claim. To ensure delivery and receipt, the Receiver recommends that you return your claim form via certified mail, overnight delivery, or some other traceable delivery method.

If your address changes after submitting this form, please notify the Receiver in writing of your new address as soon as possible. It is your responsibility to keep the Receiver advised of your current address.

Please address any questions regarding this process to the Receiver, Robert D. Terry at 770-673-0047.

CLAIM INFORMATION

| 1. (All claimants) Cla claimant): | imant Information (fill out a separate form for each |
|-----------------------------------|--|
| Name(s) of Claimant: | |
| Contact Person (if differen | nt): |
| Tax ID (FEIN or SSN): | |
| Street Address: | |
| City: | |
| State: | |
| Country: | Zip: |
| Email: | |
| Home Phone: | |
| Work Phone: | |
| Cell Phone: | |
| | |

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[Please continue to next page]

| 2. to nor | | | imants) If you claim you r goods or services, comp | | | oney by any Defendant due on and section 4. | |
|-----------------|---------------------|--|---|----------------|--------|--|--|
| | (a) | The undersigned Claimant holds a claim or claims in the amount of \$ | | | | | |
| | (b) | The basis for this claim is as follows (Check all that apply and provide any explanation in the space provided below): | | | | | |
| | | | Services performed | | | Money loaned | |
| | | | Goods sold | | | Severance | |
| | | | Wages and compensation | n | | Taxes | |
| | | | Other | | | | |
| Defer arisin | (Invelaim of ndants | estment claim | o submit supporting document, loan or other claimant in the amount of \$ refor monies loaned to or it transactions. Please cheed by each: | umentants) The | e unde | ersigned Claimant holds a against the following with such entities, or | |
| | Sum | mit W | ealth Management, Inc. | | Amo | ount: | |
| | | mit Investment Fund, LP Amount: | | | | | |
| | Asse | et Class Diversification Fund, LP Amount: | | | | | |
| | Priva | ate Cre | edit Opportunities Fund, I | LC | Amo | ount: | |
| | Othe | er | | | Amo | ount: | |
| | (If y | ou hav | ve a claim arising from De | etroit Me | emori | al Partners, LLC, please | |
| | indicate here: □) | | | | | | |

Basis for Claim. Please write on the lines provided the details of any money (a) loaned or invested. Please do not submit additional documentation at this time. The Receiver may ask for additional or supporting documentation at a later date. If you have more than one investment or account please detail each investment or account (attach extra sheets if necessary): **Investment or Loan 1:** Fund Name: **Initial Investment Amount:** Initial Investment Date: Subsequent Investment Amount(s): Date(s) of Subsequent Investment(s): Account Number: Who sold you your investment (if applicable) and/or introduced you to the above named Defendants? (Please list all persons and include contact information if possible): To the extent you have withdrawn any portion of your investment or received any money from the Defendants or related entities prior the date on which you file this form, whether as a redemption, distribution of interest, "investment returns" or as return of principal, please identify all such withdrawals and payments by date and amount.

| Investment or Loan 2: |
|---|
| Fund Name: |
| Initial Investment Amount: |
| Initial Investment Date: |
| Subsequent Investment Amount(s): |
| Date(s) of Subsequent Investment(s): |
| Account Number: |
| (b) Who sold you your investment (if applicable) and/or introduced you to the above named Defendants? (Please list all persons and include contact information if possible): |
| (c) To the extent you have withdrawn any portion of your investment or received any money from the Defendants or related entities prior to the date on which you file this form, whether as a redemption, distribution of interest, "investment returns" or as return of principal, please identify all such withdrawals and payments by date and amount. |
| |

Please attach additional pages if necessary.

| 4. | In making this claim, Claimant hereby affirms, under penalty | | |
|----|--|---|--|
| | a. | That the amounts claimed herein are true and correct; | |

b. That the claim amount set forth herein is the principal amount invested or loaned by the undersigned, or the net amount of any trade claim, less any amounts received from or on behalf of the Defendants and does not include any interest, earnings or returns;

c. The claim amount set forth above is the net amount owed after crediting all offsets, credits and payments received by the undersigned.

| This | day of _ | , 2013 |
|------|----------|--------------------------------------|
| | | |
| | | |
| | | Signature(s) |
| • | | |
| | | Print Name(s) |
| | | |
| | | Title (if claimant is a corporation) |

NOTE: CLAIM FORM MUST BE RECEIVED ON OR BEFORE APRIL 30, 2013. YOU MUST <u>SIGN</u> AND <u>DATE</u> YOUR CLAIM FORM FOR IT TO BE COMPLETE.

^{*} Penalty for presenting fraudulent claim: Fine of up to \$50,000 or imprisonment for up to 5 years, or both 18 U.S.C. §152.