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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # B05000000301			
1. Name of Limited Partnership Alliance HC II Limited Partnership			
2. Principal Office Address - No P.O. Box # c/o The Milestone Group, 6429 LBJ Freeway		3. Mailing Office Address c/o The Milestone Group, 6429 LBJ Freeway	
Suite, Apt. #, etc. Suite 800		Suite, Apt. #, etc. Suite 800	
City & State Dallas, TX		City & State Dallas, TX	
Zip 75240	Country USA	Zip 75240	Country USA
4. Date Formed or Registered To Do Business in Florida July 11, 2005			
5. FRI Number 20-3122657		☐ Applied For ☒ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐ \$75 additional fee required for a certificate of status			
8. Name and Address of Current Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. City Plantation		7. FEES: Filing Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$66.75 for each year due this office. Penalty Fee(s): \$800 for each year or part thereof until partnership revoked on our records. E-mail Address: Daniel.Balog@hga-capital.de E-mail address to be used for future annual report notices.	
Zip Code FL 33324		Signature  Joe Villeda Assistant Secretary DATE 1/23/15	
9. Pursuant to the provisions of sections 620.1810 or 620.1809, Florida Statutes, I hereby accept the appointment as Registered Agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment)			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
10. Name(s) of General Partner(s) Alliance HC GP II, L.L.C.	Address of Each General Partner (Do NOT Use Post Office Box Number) c/o The Milestone Group, 6429 LBJ Freeway, Suite 800	City, State and Zip Code Dallas, TX 75240	10a. Registration Document Number M05000003853
REINSTATEMENT 2013-2015			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.			
11. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of this limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes. Any false or misleading information submitted to a document to the Department of State constitutes a third degree felony as provided for in s 817.13, F.S.			
SIGNATURE  Typed or Printed Name of General Partner Submitting Form: STEVEN IVANKOVICH		DATE 1-23-15 Telephone Number 712 315 4826	

S. HAWKES

JAN 26 A.M.

EXAMINER

Division of Corporations

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Florida Department of State
Division of Corporations
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LP/LLLP REINSTATEMENT
ALLIANCE HC II LIMITED PARTNERSHIP

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