

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014597

Entity Name: HL-ML II, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

300A WHARFSIDE WAY
JACKSONVILLE, FL 32207

New Principal Place of Business:

C/O KIRSCHNER & LEGLER PA
50 N LAURA ST, STE 2900
JACKSONVILLE, FL 32202 US

Current Mailing Address:

300A WHARFSIDE WAY
JACKSONVILLE, FL 32207

New Mailing Address:

C/O KIRSCHNER & LEGLER PA
50 N LAURA ST, STE 2900
JACKSONVILLE, FL 32202 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGLER, MITCHELL W
300A WHARFSIDE WAY
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LEGLER, MITCHELL W
50 N LAURA STREET
SUITE 2900
JACKSONVILLE, FL 32202 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:

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEGLER, MITCHELL W
Address: 300A WHARFSIDE WAY
City-St-Zip: JACKSONVILLE, FL 32207 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEGLER, MITCHELL W
Address: 50 N LAURA ST, STE 2900
City-St-Zip: JACKSONVILLE, FL 32202 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under 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 608, Florida Statutes.

SIGNATURE: MITCHELL W LEGLER

MGRM

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date