2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT May 01, 2008 08:00 Al Secretary of State **DOCUMENT # M06000004680** 1. Entity Name ALCO FLORIDA HOLDINGS II, LLC Principal Place of Business Mailing Address 5317 W. COLLUM AVENUE 5317 W. COLLUM AVENUE CHICAGO, IL 60641 CHICAGO, IL 60641 CR2E083 (12/07) 04292008 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 31-8306332 Not Applicable \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGR TITLE HEISE, RICHARD A SR NAME STREET ADDRESS 5317 WEST CULLOM AVE U00000941848 CHICAGO, IL 60641 05/28/08-80121-021 138.75 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TIΠF NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE