

CUSTODIAL REGISTRATION CHANGE OF OWNERSHIP FORM

This form may only be used to transfer ownership of shares (the "Securities") from a resigning custodian in a custodial registration (the "Resigning Custodian") in Resource Real Estate Opportunity REIT II, Inc. to a new custodian in a custodial registration (the "New Custodian") for the **same beneficial owner**. **PLEASE NOTE:** *This form does not affect the distribution election currently in effect or the financial advisor for the account. If the beneficial owner wishes to modify the distribution election please complete the Account Update Request Form. If the beneficial owner wishes to change the financial advisor on the account, please complete the Resource Real Estate Change of Advisor/Broker Dealer Form.*

Complete and deliver this form to:

RESOURCE REAL ESTATE OPPORTUNITY REIT II, INC.
866-469-0129
Fax: 816-701-8085

Regular Mail
P.O. Box 219169
Kansas City, MO 64121

Overnight Delivery
430 West 7th Street
Kansas City, MO 64105

1. TYPE OF REGISTRATION (Current registration)

Custodial Registration

- Traditional IRA** - Custodian signature required.
- Roth IRA** - Custodian signature required.
- KEOGH Plan** - Custodian signature required.
- Simplified Employee Pension/Trust (SEP)** - Custodian signature required.
- Pension or Profit Sharing Plan** - Custodian signature required.
- Other (Specify):**

_____ *Custodian signature required.*

Resigning Custodian Information

Name of Custodian: _____

Custodian Tax ID #: _____

Custodian Account #: _____

Custodian Telephone #: _____

Street/P.O. Box: _____

City, State, ZIP: _____

2. BENEFICIAL OWNER REGISTRATION

Name of Owner: _____ Tax ID/SS #: _____

Account #: _____

Street/P.O. Box: _____ City: _____ State: _____ ZIP Code: _____

3. RESIGNING CUSTODIAN SIGNATURE

The Resigning Custodian hereby assigns and Transfers to the New Custodian all of the Securities in the custodial registration described above.

Signature of Resigning Custodian: _____ Date: _____

Medallion Stamp Guarantee

4. NEW CUSTODIAN INFORMATION *New Custodian signature required.*

Name of Custodian: _____ Custodian Tax ID #: _____

Custodian Account #: _____ Custodian Telephone #: _____

Street/P.O. Box: _____ City: _____ State: _____ ZIP Code: _____

Signature of New Custodian: _____ Date: _____

Medallion Stamp Guarantee

5. BROKER/DEALER: _____

REGISTERED ADVISOR(S): _____