Aircastle LTD Form SC 13G/A August 13, 2012

> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

> > SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No. 4) \*

Aircastle Limited \_\_\_\_\_\_ (Name of Issuer) Common Shares, par value \$0.01 per share \_\_\_\_\_\_ (Title of Class of Securities) G0129K104 \_\_\_\_\_ .\_\_\_\_\_ (CUSIP Number) August 10, 2012 (Date of Event which Requires Filing of this Statement) Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

| Rule 13d-1(b)

| Rule 13d-1(c)

|X| Rule 13d-1(d)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

SCHEDULE 13G CUSIP No. G0129K104 NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON Fortress Investment Fund III Sub LLC CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

|    | (See Instruction                     | ns)      | (a)   |
|----|--------------------------------------|----------|---|
| 3  | SEC USE ONLY                         |          |   |
| 4  | CITIZENSHIP OR I<br>Delaware         | PLACE OF | F ORGANIZATION                                    |
|    | NUMBER OF                            | 5        | SOLE VOTING POWER                                 |
|    | SHARES<br>BENEFICIALLY               | 6        | SHARED VOTING POWER<br>-0-                        |
|    | OWNED BY                             | 7        | SOLE DISPOSITIVE POWER                            |
|    | EACH                                 | <br>8    | -0-   |
|    | REPORTING                            | 8        | SHARED DISPOSITIVE POWER -0-                      |
|    | PERSON                               |          |   |
|    | WITH                                 |          |   |
| 9  | AGGREGATE AMOUNT                     | Γ BENEFI | ICIALLY OWNED BY EACH REPORTING PERSON            |
|    | -0-                                  |          |   |
| 10 | CHECK IF THE AGO<br>SHARES (See Inst |          | AMOUNT IN ROW (9) EXCLUDES CERTAIN                |
| 11 | PERCENT OF CLASS                     | REPRES   | SENTED BY AMOUNT IN ROW (9)                       |
| 12 | TYPE OF REPORTING                    | NG PERSO | ON (See Instructions)                             |
|    | P No. G0129K104                      |          | SCHEDULE 13                                       |
| 1  | NAME OF REPORTIN                     | NG PERSO | NC  |
|    |                                      |          | ICATION NO. OF ABOVE PERSON<br>nd III Sub Two LLC |
| 2  | (See Instruction                     | ns)      | BOX IF A MEMBER OF A GROUP  (a)      (b)          |
| 3  | SEC USE ONLY                         |          |   |
| 4  | CITIZENSHIP OR I<br>Delaware         | PLACE OF |   |
|    | NUMBER OF                            | 5        | SOLE VOTING POWER                                 |

| BENEFICIALLY |                                      | 6   | SHARED VOTING POWER -0-                  |  |  |  |  |
|--------------|--------------------------------------|---|--|--|--|--|--|
|              | OWNED BY                             | 7   | SOLE DISPOSITIVE POWER -0-               |  |  |  |  |
|              | EACH<br>REPORTING                    |   | SHARED DISPOSITIVE POWER                 |  |  |  |  |
|              | PERSON                               |   |  |  |  |  |  |
|              | WITH                                 |   |  |  |  |  |  |
| 9            | AGGREGATE AMOUNT                     | BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON    |  |  |  |  |
| 10           |                                      | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |  |  |  |  |  |
| 11           | PERCENT OF CLASS                     | REPRES  | SENTED BY AMOUNT IN ROW (9)              |  |  |  |  |
| 12           | TYPE OF REPORTIN                     | G PERSC   | ON (See Instructions)                    |  |  |  |  |
| CUSII        | P No. G0129K104  NAME OF REPORTIN    | <br>G PERSO   | NO<br>                                   |  |  |  |  |
|              |                                      | G PERSC   | NO.                                      |  |  |  |  |
|              | S.S. OR I.R.S. I<br>Fortress Investm |   | CCATION NO. OF ABOVE PERSON  nd III LP   |  |  |  |  |
| 2            | CHECK THE APPROP<br>(See Instruction |   | BOX IF A MEMBER OF A GROUP  (a)      (b) |  |  |  |  |
| 3            | SEC USE ONLY                         |   |  |  |  |  |  |
| 4            | CITIZENSHIP OR P<br>Delaware         | LACE OF   | F ORGANIZATION                           |  |  |  |  |
|              | NUMBER OF                            | 5   | SOLE VOTING POWER                        |  |  |  |  |
|              | SHARES<br>BENEFICIALLY               | 6   | SHARED VOTING POWER -0-                  |  |  |  |  |
|              | OWNED BY                             | 7   | SOLE DISPOSITIVE POWER -0-               |  |  |  |  |
|              | EACH                                 | <br>8   | SHARED DISPOSITIVE POWER                 |  |  |  |  |
|              | REPORTING                            |   | -0-                                      |  |  |  |  |
|              | PERSON                               |   |  |  |  |  |  |
|              | WITH                                 |   |  |  |  |  |  |

| 9     | AGGREGATE AMOU   | JNT BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON                |  |  |
|-------|--|-------------|--|--|--|
| 10    | CHECK IF THE A   |             | AMOUNT IN ROW (9) EXCLUDES CERTAIN                   |  |  |
| 11    | PERCENT OF CLA   | ASS REPRESI | ENTED BY AMOUNT IN ROW (9)                           |  |  |
| 12    | TYPE OF REPORT   | ING PERSOI  | N (See Instructions)                                 |  |  |
|       |  |             | SCHEDULE 13G   |  |  |
| CUSIP | No. G0129K104  |             |  |  |  |
| 1     | NAME OF REPORT   | ING PERSO   | N  |  |  |
|       |  |             | CATION NO. OF ABOVE PERSON<br>d III (Fund B) Sub LLC |  |  |
| 2     | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (See Instructions)  (a)      (b) |             |  |  |  |
| 3     | SEC USE ONLY   |             |  |  |  |
| 4     | CITIZENSHIP OF   | R PLACE OF  | ORGANIZATION   |  |  |
|       | NUMBER OF  | 5           | SOLE VOTING POWER -0-                                |  |  |
|       | SHARES   | <br>6       | SHARED VOTING POWER                                  |  |  |
|       | BENEFICIALLY   |             | -0-  |  |  |
|       | OWNED BY   | 7           | SOLE DISPOSITIVE POWER -0-                           |  |  |
|       | EACH   | 8           | SHARED DISPOSITIVE POWER                             |  |  |
|       | REPORTING  |             | -0-  |  |  |
|       | PERSON   |             |  |  |  |
|       | WITH   |             |  |  |  |
| 9     | AGGREGATE AMOU   | JNT BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON                |  |  |
| 10    | CHECK IF THE A   |             | AMOUNT IN ROW (9) EXCLUDES CERTAIN                   |  |  |
| 11    | 0.0%   |             | ENTED BY AMOUNT IN ROW (9)                           |  |  |
| 12    |  |             | N (See Instructions)                                 |  |  |

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SCHEDULE 13G .\_\_\_\_\_ CUSIP No. G0129K104 NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON Fortress Investment Fund III (Fund B) Sub Two LLC \_\_\_\_\_\_ CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a) | (b) SEC USE ONLY CITIZENSHIP OR PLACE OF ORGANIZATION Delaware NUMBER OF 5 SOLE VOTING POWER -0-SHARES SHARED VOTING POWER BENEFICIALLY -0-\_\_\_\_\_ OWNED BY 7 SOLE DISPOSITIVE POWER -0-EACH 8 SHARED DISPOSITIVE POWER REPORTING -0-PERSON WITH AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 11 0.0% TYPE OF REPORTING PERSON (See Instructions) SCHEDULE 13G CUSIP No. G0129K104 NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON

|      | Fortress Investm             | ment Fun  | d III (Fund B) I    | _P                     |              |  |  |
|------|------------------------------|---|---------------------|------------------------|--------------|--|--|
| 2    | CHECK THE APPROF             | ns)   | OX IF A MEMBER C    | DF A GROUP (a)     (b) |              |  |  |
| 3    | SEC USE ONLY                 |   |                     |                        |              |  |  |
| 4    | CITIZENSHIP OR E<br>Delaware | PLACE OF  |                     |                        |              |  |  |
|      | NUMBER OF                    | 5   |                     | POWER                  |              |  |  |
|      | SHARES<br>BENEFICIALLY       | 6   | SHARED VOTIN        |                        |              |  |  |
|      | OWNED BY                     | 7   | SOLE DISPOSI<br>-0- | TIVE POWER             |              |  |  |
|      | EACH<br>REPORTING            | 8   | SHARED DISPO        | OSITIVE POWER          |              |  |  |
|      | PERSON                       |   |                     |                        |              |  |  |
|      | WITH                         |   |                     |                        |              |  |  |
| 9    | AGGREGATE AMOUNT             | BENEFI  | CIALLY OWNED BY     | EACH REPORTING E       | PERSON       |  |  |
| 10   | SHARES (See Inst             | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |                     |                        |              |  |  |
| 11   |                              | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%                              |                     |                        |              |  |  |
| 12   | TYPE OF REPORTIN             | NG PERSO  | N (See Instructi    | ons)                   |              |  |  |
|      |                              |   |                     |                        |              |  |  |
|      |                              |   |                     |                        | SCHEDULE 13G |  |  |
| CUSI | P No. G0129K104              |   |                     |                        |              |  |  |
| 1    | NAME OF REPORTIN             | NG PERSO  | N                   |                        |              |  |  |
|      | S.S. OR I.R.S. I             |   |                     |                        |              |  |  |
| 2    | CHECK THE APPROF             | ns)   | OX IF A MEMBER C    | DF A GROUP (a)     (b) |              |  |  |
| 3    | SEC USE ONLY                 |   |                     |                        |              |  |  |
| 4    | CITIZENSHIP OR E<br>Delaware | PLACE OF  | ORGANIZATION        |                        |              |  |  |
|      | NUMBER OF                    | <br>5   | SOLE VOTING         | POWER                  |              |  |  |

-0-

|       | SHARES<br>BENEFICIALLY             |   | SHARED VOTING POWER                             |  |  |  |  |
|-------|------------------------------------|---|---|--|--|--|--|
|       | OWNED BY                           | 7   | SOLE DISPOSITIVE POWER -0-                      |  |  |  |  |
|       | EACH                               |   |   |  |  |  |  |
|       | REPORTING                          | 8   | SHARED DISPOSITIVE POWER<br>-0-                 |  |  |  |  |
|       | PERSON                             |   |   |  |  |  |  |
|       | WITH                               |   |   |  |  |  |  |
| 9     | AGGREGATE AMOUN                    | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON<br>-0- |   |  |  |  |  |
| 10    | CHECK IF THE AG<br>SHARES (See Ins |   | AMOUNT IN ROW (9) EXCLUDES CERTAIN              |  |  |  |  |
| 11    | PERCENT OF CLAS                    | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)                   |   |  |  |  |  |
| 12    | TYPE OF REPORTI                    | NG PERSO  | N (See Instructions)                            |  |  |  |  |
| CUSIP | No. G0129K104                      |   |   |  |  |  |  |
| CUSIP | No. G0129K104                      |   |   |  |  |  |  |
| 1     | NAME OF REPORTI                    |   | N   |  |  |  |  |
|       |                                    |   | CATION NO. OF ABOVE PERSON<br>d III (Fund C) LP |  |  |  |  |
| 2     | (See Instruction                   | ens)  | OX IF A MEMBER OF A GROUP  (a)      (b)         |  |  |  |  |
| 3     | SEC USE ONLY                       |   |   |  |  |  |  |
| 4     | CITIZENSHIP OR<br>Delaware         | PLACE OF  | ORGANIZATION                                    |  |  |  |  |
|       | NUMBER OF                          | 5   | SOLE VOTING POWER                               |  |  |  |  |
|       | SHARES                             |   | -0-   |  |  |  |  |
|       | BENEFICIALLY                       | 6   | SHARED VOTING POWER<br>-0-                      |  |  |  |  |
|       | OWNED BY                           | 7   | SOLE DISPOSITIVE POWER -0-                      |  |  |  |  |
|       | EACH                               | 0   |   |  |  |  |  |
|       | REPORTING                          | 8   | SHARED DISPOSITIVE POWER<br>-0-                 |  |  |  |  |
|       | PERSON                             |   |   |  |  |  |  |

|          | WITH  |            |   |              |
|----------|---|------------|---|--------------|
| 9        | AGGREGATE AMOUNT  | BENEFICIA  | ALLY OWNED BY EACH REPORTING PER              | SON          |
| 10       | CHECK IF THE AGGR<br>SHARES (See Instr  |            | OUNT IN ROW (9) EXCLUDES CERTAIN              |              |
| 11       | PERCENT OF CLASS  | REPRESENT  | CED BY AMOUNT IN ROW (9)                      |              |
| 12       | TYPE OF REPORTING   | ; PERSON ( | (See Instructions)                            |              |
|          |   |            |   |              |
|          |   |            |   | SCHEDULE 13G |
| CUSIP No | G0129K104   |            |   |              |
| 1        | NAME OF REPORTING   | PERSON     |   |              |
|          |   |            | TION NO. OF ABOVE PERSON TII (Fund D) Sub Ltd |              |
| 2        | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b) |            |   |              |
| 3        | SEC USE ONLY  |            |   |              |
| 4        | CITIZENSHIP OR PI<br>Cayman Islands   | ACE OF OF  | RGANIZATION                                   |              |
|          | NUMBER OF   | 5          | SOLE VOTING POWER                             |              |
| BI       | SHARES<br>ENEFICIALLY   | 6          | SHARED VOTING POWER                           |              |
|          | OWNED BY  | 7          | SOLE DISPOSITIVE POWER                        |              |
|          | EACH<br>REPORTING   | 8          | SHARED DISPOSITIVE POWER                      |              |
|          | PERSON  |            |   |              |
|          | WITH  |            |   |              |
| 9        | -0-   |            | ALLY OWNED BY EACH REPORTING PER              |              |
| 10       |   | EGATE AMO  | DUNT IN ROW (9) EXCLUDES CERTAIN              |              |
| 11       | PERCENT OF CLASS  | REPRESENT  | TED BY AMOUNT IN ROW (9)                      |              |
|          |   |            |   |              |

| 12    | TYPE OF REPORTING                      | FERSON    | (See Instructions)                         |              |
|-------|--|-----------|--|--------------|
|       |  |           |  | SCHEDULE 13G |
| CUSIE | P No. G0129K104                        |           |  |              |
| 1     | NAME OF REPORTING                      | F PERSON  |  |              |
|       |  |           | TION NO. OF ABOVE PERSON III (Fund D) L.P. |              |
| 2     | CHECK THE APPROPE<br>(See Instructions |           | IF A MEMBER OF A GROUP (a)     (b)         |              |
| 3     | SEC USE ONLY                           |           |  |              |
| 4     | CITIZENSHIP OR PI<br>Cayman Islands    | ACE OF C  | PGANIZATION                                |              |
|       | NUMBER OF                              | 5         | SOLE VOTING POWER                          |              |
|       | SHARES<br>BENEFICIALLY                 | 6         | SHARED VOTING POWER                        |              |
|       | OWNED BY                               | 7         | SOLE DISPOSITIVE POWER                     |              |
|       | EACH                                   | 8         | SHARED DISPOSITIVE POWER                   |              |
|       | REPORTING                              |           | -0-  |              |
|       | PERSON                                 |           |  |              |
|       | WITH                                   |           |  |              |
| 9     | AGGREGATE AMOUNT                       |           | ALLY OWNED BY EACH REPORTING PE            |              |
| 10    | CHECK IF THE AGGF<br>SHARES (See Instr | ructions) | MOUNT IN ROW (9) EXCLUDES CERTAI           |              |
| 11    | PERCENT OF CLASS 0.0%                  | REPRESEN  | TED BY AMOUNT IN ROW (9)                   |              |
| 12    | PN                                     | F PERSON  | (See Instructions)                         |              |
|       |  |           |  |              |
|       |  |           |  | SCHEDULE 13G |
| CUSIE | P No. G0129K104                        |           |  |              |
| 1     | NAME OF REPORTING                      | PERSON    |  |              |

9

|      |  |   | CATION NO. OF ABOVE PERSON<br>d III (Fund E) Sub Ltd |  |  |  |
|------|--|---|--|--|--|--|
| 2    | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (See Instructions)  (a)      (b) |   |  |  |  |  |
| 3    | SEC USE ONLY   |   |  |  |  |  |
| 4    | CITIZENSHIP OR P<br>Cayman Islands   | LACE OF   | ORGANIZATION   |  |  |  |
|      | NUMBER OF  | 5   | SOLE VOTING POWER -0-                                |  |  |  |
|      | SHARES   | 6   | SHARED VOTING POWER                                  |  |  |  |
|      | BENEFICIALLY   |   | -0-  |  |  |  |
|      | OWNED BY   | 7   | SOLE DISPOSITIVE POWER -0-                           |  |  |  |
|      | EACH   | 8   | SHARED DISPOSITIVE POWER                             |  |  |  |
|      | REPORTING  | J   | -0-  |  |  |  |
|      | PERSON   |   |  |  |  |  |
|      | WITH   |   |  |  |  |  |
| 9    | AGGREGATE AMOUNT   | BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON                |  |  |  |
| 10   |  | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |  |  |  |  |
| 11   | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)                                  |   |  |  |  |  |
| 12   | TYPE OF REPORTIN   | IG PERSO  | N (See Instructions)                                 |  |  |  |
|      |  |   |  |  |  |  |
|      |  |   | SCHEDULE 130   |  |  |  |
| CUSI | P No. G0129K104  |   |  |  |  |  |
| 1    | NAME OF REPORTIN   | IG PERSO  | N  |  |  |  |
|      |  |   | CATION NO. OF ABOVE PERSON<br>d III (Fund E) L.P.    |  |  |  |
| 2    | CHECK THE APPROP<br>(See Instruction   |   | OX IF A MEMBER OF A GROUP  (a)      (b)              |  |  |  |
| 3    | SEC USE ONLY   |   |  |  |  |  |
| 4    | CITIZENSHIP OR P<br>Cayman Islands   | LACE OF   | ORGANIZATION   |  |  |  |

|      | NUMBER OF  |             | SOLE VOTING POWER -0-  |
|------|--|-------------|--|
|      | SHARES   |             |  |
|      | BENEFICIALLY   | 6           | SHARED VOTING POWER -0-  |
|      | OWNED BY   | 7           | SOLE DISPOSITIVE POWER -0-   |
|      | EACH   | 8           | SHARED DISPOSITIVE POWER   |
|      | REPORTING  | Ü           | -0-  |
|      | PERSON   |             |  |
|      | WITH   |             |  |
| 9    | AGGREGATE AMOUNT   | BENEFIC     | TIALLY OWNED BY EACH REPORTING PERSON  |
| 10   | CHECK IF THE AGGI<br>SHARES (See Insti   |             | MOUNT IN ROW (9) EXCLUDES CERTAIN  |
| 11   | PERCENT OF CLASS   | REPRESE     | NTED BY AMOUNT IN ROW (9)  |
| 12   | TYPE OF REPORTING  | PERSON      | (See Instructions)   |
| CUSI | <br>P No. G0129K104  |             | SCHEDULE 13G   |
| 1    | NAME OF REPORTING  | PERSON      |  |
|      |  |             | TATION NO. OF ABOVE PERSON I III (Coinvestment Fund A) Sub LLC                                     |
| 2    | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b)              |             |  |
| 3    | (See Instructions  | 3)          | (a)    <br>(b)   |
| 4    |  | 3)          | (a)    <br>(b)   |
|      | (See Instructions  | 5)          | (a)    <br>(b)    <br>   |
|      | (See Instructions SEC USE ONLY CITIZENSHIP OR PI   | 5)          | (a)    <br>(b)   |
|      | (See Instructions  SEC USE ONLY  CITIZENSHIP OR PI Delaware                                  | 5)<br><br>  | (a)     (b)     ORGANIZATION  SOLE VOTING POWER  |
|      | (See Instructions  SEC USE ONLY  CITIZENSHIP OR PI Delaware  NUMBER OF                       | LACE OF     | (a)     (b)     ORGANIZATION  SOLE VOTING POWER -0-  |
|      | (See Instructions  SEC USE ONLY  CITIZENSHIP OR PI Delaware  NUMBER OF  SHARES               | LACE OF     | (a)     (b)     ORGANIZATION  SOLE VOTING POWER -0- SHARED VOTING POWER -0-                        |
|      | (See Instructions  SEC USE ONLY  CITIZENSHIP OR PI Delaware  NUMBER OF  SHARES  BENEFICIALLY | 5 LACE OF 5 | (a)     (b)     ORGANIZATION  SOLE VOTING POWER -0- SHARED VOTING POWER -0- SOLE DISPOSITIVE POWER |

PERSON

11

|    | WITH                            |             |  |
|----|---------------------------------|-------------|--|
| 9  | AGGREGATE AMOU<br>-0-           | JNT BENEFIC | CIALLY OWNED BY EACH REPORTING PERSON                        |
| 10 | CHECK IF THE A                  |             | AMOUNT IN ROW (9) EXCLUDES CERTAIN                           |
| 11 | PERCENT OF CLA                  | ASS REPRESI | ENTED BY AMOUNT IN ROW (9)                                   |
| 12 | TYPE OF REPORT                  | ING PERSON  | N (See Instructions)   |
|    |                                 |             | SCHEDULE 13G   |
|    |                                 |             |  |
|    | No. G0129K104                   |             |  |
| 1  | NAME OF REPORT                  | TING PERSON | N<br>  |
|    |                                 |             | CATION NO. OF ABOVE PERSON<br>d III (Coinvestment Fund A) LP |
| 2  | CHECK THE APPH<br>(See Instruct |             | OX IF A MEMBER OF A GROUP  (a)      (b)                      |
| 3  | SEC USE ONLY                    |             |  |
| 4  | CITIZENSHIP OF<br>Delaware      | R PLACE OF  | ORGANIZATION   |
|    | NUMBER OF                       | 5           | SOLE VOTING POWER -0-  |
|    | SHARES<br>BENEFICIALLY          | 6           | SHARED VOTING POWER  |
|    | OWNED BY                        | 7           | SOLE DISPOSITIVE POWER<br>-0-                                |
|    | EACH                            | 8           | SHARED DISPOSITIVE POWER                                     |
|    | REPORTING                       |             | -0-  |
|    | PERSON                          |             |  |
|    | WITH                            |             |  |
| 9  | -0-                             |             | CIALLY OWNED BY EACH REPORTING PERSON                        |
| 10 |                                 | AGGREGATE A | AMOUNT IN ROW (9) EXCLUDES CERTAIN                           |

PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)

|       | 0.0%                             |           |   |
|-------|----------------------------------|-----------|---|
| 12    | TYPE OF REPORT                   | ING PERSO | N (See Instructions)  |
|       |                                  |           |   |
|       |                                  |           | SCHEDULE 13G  |
| CUSIP | No. G0129K104                    |           |   |
| 1     | NAME OF REPORT                   | ING PERSO | N   |
|       |                                  |           | CATION NO. OF ABOVE PERSON<br>d III (Coinvestment Fund B) Sub LLC |
| 2     | CHECK THE APPR<br>(See Instructi |           | OX IF A MEMBER OF A GROUP  (a)      (b)                           |
| 3     | SEC USE ONLY                     |           |   |
| 4     | CITIZENSHIP OR<br>Delaware       | PLACE OF  | ORGANIZATION  |
|       | NUMBER OF                        | 5         | SOLE VOTING POWER   |
|       | BENEFICIALLY                     | 6         | SHARED VOTING POWER -0-   |
|       | OWNED BY                         | 7         | SOLE DISPOSITIVE POWER -0-  |
|       | EACH                             | <br>8     | SHARED DISPOSITIVE POWER  |
|       | REPORTING                        | Ŭ         | -0-   |
|       | PERSON                           |           |   |
|       | WITH                             |           |   |
| 9     | AGGREGATE AMOU                   | NT BENEFI | CIALLY OWNED BY EACH REPORTING PERSON                             |
| 10    | CHECK IF THE A<br>SHARES (See In |           | AMOUNT IN ROW (9) EXCLUDES CERTAIN                                |
|       |                                  | SS REPRES | ENTED BY AMOUNT IN ROW (9)  |
| 11    | PERCENT OF CLA                   |           |   |

SCHEDULE 13G

\_\_\_\_\_

CUSIP No. G0129K104

| 1     | NAME OF REPORTIN  | G PERSON  | 1                      |                        |         |     |  |
|-------|---|---|------------------------|------------------------|---------|-----|--|
|       |   |   | CATION NO. OF ABOVE PE |                        |         |     |  |
| 2     | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (See Instructions)  (b) |   |                        |                        |         |     |  |
| 3     | SEC USE ONLY  |   |                        |                        |         |     |  |
| 4     | CITIZENSHIP OR P<br>Delaware  | LACE OF   | ORGANIZATION           |                        |         |     |  |
|       | NUMBER OF   | 5   | SOLE VOTING POWER      |                        |         |     |  |
|       | SHARES<br>BENEFICIALLY  | 6   | SHARED VOTING POWE     | lr                     |         |     |  |
|       | OWNED BY  | 7   | SOLE DISPOSITIVE F     | OWER                   |         |     |  |
|       | EACH<br>REPORTING   | 8   | SHARED DISPOSITIVE     | POWER                  |         |     |  |
|       | PERSON  |   |                        |                        |         |     |  |
|       | WITH  |   |                        |                        |         |     |  |
| 9     | AGGREGATE AMOUNT  | BENEFIC   | CIALLY OWNED BY EACH F | EPORTING PERSO         | N       |     |  |
| 10    |   | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |                        |                        |         |     |  |
| 11    | PERCENT OF CLASS  | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%                              |                        |                        |         |     |  |
| 12    | TYPE OF REPORTIN  | G PERSON  | N (See Instructions)   |                        |         |     |  |
|       |   |   |                        |                        |         |     |  |
|       |   |   |                        | S                      | CHEDULE | 13G |  |
| CUSIP | No. G0129K104   |   |                        |                        |         |     |  |
| 1     | NAME OF REPORTIN  | G PERSON  | 1                      |                        |         |     |  |
|       |   |   | CATION NO. OF ABOVE PE |                        |         |     |  |
| 2     | CHECK THE APPROP<br>(See Instruction                                      |   |                        | ROUP<br>(a)    <br>(b) |         |     |  |
| 3     | SEC USE ONLY  |   |                        |                        |         |     |  |
|       |   |   |                        |                        |         |     |  |

| 4                                | CITIZENSHIP OR Delaware  | PLACE OF   | ORGANIZATION  |
|----------------------------------|--|--|---|
|                                  | NUMBER OF  | 5  | SOLE VOTING POWER<br>-0-  |
|                                  | SHARES   | <br>6  | SHARED VOTING POWER   |
|                                  | BENEFICIALLY   | 0  | -0-   |
|                                  | OWNED BY   | 7  | SOLE DISPOSITIVE POWER<br>-0-   |
|                                  | EACH   | 8  | SHARED DISPOSITIVE POWER  |
|                                  | REPORTING  |  | -0-   |
|                                  | PERSON   |  |   |
|                                  | WITH   |  |   |
| 9                                | AGGREGATE AMOUN'   | T BENEFI   | CIALLY OWNED BY EACH REPORTING PERSON   |
| 10                               | CHECK IF THE AGG<br>SHARES (See Ins  |  | AMOUNT IN ROW (9) EXCLUDES CERTAIN  |
| 11                               | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%   |  |   |
| 11                               | 0.0%   |  |   |
|                                  |  | NG PERSOI  | N (See Instructions)  |
| 12                               | TYPE OF REPORTII   | NG PERSOI  |   |
| 12                               | TYPE OF REPORTI  | NG PERSOI  |   |
| 12                               | TYPE OF REPORTII   |  | SCHEDULE 13G  |
| 12 CUSI                          | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S.  | NG PERSOI  | SCHEDULE 13G  |
| 12 CUSI                          | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPROX (See Instruction   | NG PERSOI LOENTIFIO Ment Func PRIATE BO              | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP (a)     (b)   |
|                                  | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPROAG (See Instruction SEC USE ONLY   | NG PERSOI IDENTIFIO ment Func PRIATE BO              | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP (a)     (b)   |
| 12<br><br>CUSI<br><br>1<br><br>2 | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPROAG (See Instruction SEC USE ONLY   | NG PERSOI IDENTIFIC ment Func PRIATE Bo              | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP  (a)     (b)      ORGANIZATION  |
| 12<br><br>CUSI<br><br>1<br><br>2 | TYPE OF REPORTING OO  OO  OO  OO  OO  OO  OO  OO  OO  O  | NG PERSOI IDENTIFIC ment Func PRIATE Bo              | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP (a)     (b)      ORGANIZATION  SOLE VOTING POWER                                  |
| 12<br><br>CUSI<br><br>1<br><br>2 | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPRONG (See Instruction SEC USE ONLY CITIZENSHIP OR INDELAWARE                             | NG PERSOI IDENTIFIC ment Func PRIATE BC ns) PLACE OF | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP  (a)      (b)      ORGANIZATION  SOLE VOTING POWER  -0-                           |
| 12<br><br>CUSI<br><br>1<br><br>2 | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPROINT (See Instruction SEC USE ONLY CITIZENSHIP OR INDELAWARE NUMBER OF                  | NG PERSOI IDENTIFIO ment Func PRIATE Bo              | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP  (a)      (b)      ORGANIZATION  SOLE VOTING POWER  -0-  SHARED VOTING POWER  -0- |
| 12<br><br>CUSI<br><br>1<br><br>2 | TYPE OF REPORTING OO  P No. G0129K104  NAME OF REPORTING S.S. OR I.R.S. Fortress Investing CHECK THE APPROIG (See Instruction SEC USE ONLY  CITIZENSHIP OR INDELONATE Delaware  NUMBER OF SHARES | NG PERSOI IDENTIFIC ment Func PRIATE BC ns) PLACE OF | SCHEDULE 13G  N  CATION NO. OF ABOVE PERSON d III (Coinvestment Fund C) LP  OX IF A MEMBER OF A GROUP  (a)      (b)      ORGANIZATION  SOLE VOTING POWER  -0-  SHARED VOTING POWER      |

8 SHARED DISPOSITIVE POWER REPORTING PERSON WITH AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 11 0.0% TYPE OF REPORTING PERSON (See Instructions) SCHEDULE 13G CUSIP No. G0129K104 \_\_\_\_\_\_ NAME OF REPORTING PERSON \_\_\_\_\_\_ S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON Fortress Investment Fund III (Coinvestment Fund D) Sub Ltd 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) | | (See Instructions) (b) | | SEC USE ONLY CITIZENSHIP OR PLACE OF ORGANIZATION Cayman Islands SOLE VOTING POWER NUMBER OF -0-SHARES SHARED VOTING POWER BENEFICIALLY -0-\_\_\_\_\_ SOLE DISPOSITIVE POWER OWNED BY -0-EACH \_\_\_\_\_\_ SHARED DISPOSITIVE POWER REPORTING -0-PERSON AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN

SHARES (See Instructions)

| 11    | PERCENT OF CLAS   | SS REPRES  | ENTED BY AMOUNT IN ROW (9)                                  |  |
|-------|---|--|---|--|
| 12    | TYPE OF REPORT:   | ING PERSO  | N (See Instructions)  |  |
|       |   |  | SCHEDULE 13G  |  |
| CUSIF | P No. G0129K104   |  |   |  |
| 1     | NAME OF REPORT  | ING PERSO  | N   |  |
|       |   |  | CATION NO. OF ABOVE PERSON d III (Coinvestment Fund D) L.P. |  |
| 2     | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b)     |  |   |  |
| 3     | SEC USE ONLY  |  |   |  |
| 4     | CITIZENSHIP OR<br>Cayman Islands  | PLACE OF   | ORGANIZATION  |  |
|       | NUMBER OF   | 5  | SOLE VOTING POWER   |  |
|       | SHARES  | <br>6  | SHARED VOTING POWER   |  |
|       | BENEFICIALLY  | O  | -0-   |  |
|       | OWNED BY  | 7  | SOLE DISPOSITIVE POWER                                      |  |
|       | EACH  | 8  | SHARED DISPOSITIVE POWER                                    |  |
|       | REPORTING   |  | -0-   |  |
|       | PERSON  |  |   |  |
|       | WITH<br>  |  |   |  |
| 9     | AGGREGATE AMOUN   | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON -0- |   |  |
| 10    | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |  |   |  |
| 11    | PERCENT OF CLAS   | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%           |   |  |
| 12    | TYPE OF REPORTING PERSON (See Instructions) PN                                      |  |   |  |

SCHEDULE 13G

| CUSIP N | o. G0129K104  |           |  |  |
|---------|---|-----------|--|--|
| 1       | NAME OF REPORTIN  | IG PERSON |  |  |
|         | S.S. OR I.R.S. I<br>Fortress Fund II  |           | ATION NO. OF ABOVE PERSON                      |  |
| 2       | CHECK THE APPROF  | ıs)       | X IF A MEMBER OF A GROUP  (a)      (b)         |  |
| 3       | SEC USE ONLY  |           |  |  |
| 4       | CITIZENSHIP OR F  | LACE OF   | ORGANIZATION                                   |  |
|         | NUMBER OF   | 5         | SOLE VOTING POWER                              |  |
| В       | SHARES<br>ENEFICIALLY   | 6         | SHARED VOTING POWER<br>-0-                     |  |
|         | OWNED BY  | 7         | SOLE DISPOSITIVE POWER<br>-0-                  |  |
|         | EACH<br>REPORTING   | 8         | SHARED DISPOSITIVE POWER                       |  |
|         | PERSON  |           |  |  |
|         | WITH  |           |  |  |
| 9       | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON -0-                    |           |  |  |
| 10      | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |           |  |  |
| 11      | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%                              |           |  |  |
| 12      | TYPE OF REPORTING PERSON (See Instructions) OO                                      |           |  |  |
|         |   |           |  |  |
|         |   |           | SCHEDULE 13G                                   |  |
| CUSIP N | o. G0129K104  |           |  |  |
| 1       | NAME OF REPORTIN  |           |  |  |
|         |   |           | ATION NO. OF ABOVE PERSON<br>GP (Holdings) LLC |  |
| 2       | CHECK THE APPROF  |           | X IF A MEMBER OF A GROUP  (a)      (b)         |  |

| 3    | SEC USE ONLY  |          |                                       |  |  |
|------|---|----------|---------------------------------------|--|--|
| 4    | CITIZENSHIP OR PI<br>Delaware   | JACE OF  | ORGANIZATION                          |  |  |
|      | NUMBER OF   | 5        | SOLE VOTING POWER -0-                 |  |  |
|      | SHARES  | 6        | SHARED VOTING POWER                   |  |  |
|      | BENEFICIALLY  |          |                                       |  |  |
|      | OWNED BY  | 7        | SOLE DISPOSITIVE POWER<br>-0-         |  |  |
|      | EACH  | 8        | SHARED DISPOSITIVE POWER              |  |  |
|      | REPORTING   |          | -0-                                   |  |  |
|      | PERSON  |          |                                       |  |  |
|      | WITH  |          |                                       |  |  |
| 9    | AGGREGATE AMOUNT  | BENEFIC  | CIALLY OWNED BY EACH REPORTING PERSON |  |  |
| 10   | CHECK IF THE AGGF<br>SHARES (See Instr  |          | AMOUNT IN ROW (9) EXCLUDES CERTAIN    |  |  |
| 11   | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)                               |          |                                       |  |  |
| 12   | TYPE OF REPORTING   | F PERSON | N (See Instructions)                  |  |  |
|      |   |          | SCHEDULE 13G                          |  |  |
| CUSI | P No. G0129K104   |          |                                       |  |  |
| 1    | NAME OF REPORTING PERSON  |          |                                       |  |  |
|      | S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON<br>FIG LLC                    |          |                                       |  |  |
| 2    | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b) |          |                                       |  |  |
| 3    | SEC USE ONLY  |          |                                       |  |  |
| 4    | CITIZENSHIP OR PI<br>Delaware   | LACE OF  |                                       |  |  |
|      | NUMBER OF   | 5        | SOLE VOTING POWER<br>-0-              |  |  |
|      | SHARES<br>BENEFICIALLY  | 6        | SHARED VOTING POWER -0-               |  |  |
|      | OWNED BY  | 7        | SOLE DISPOSITIVE POWER                |  |  |

|       | EACU  |   | -0-                                   |  |  |
|-------|---|---|---------------------------------------|--|--|
|       | EACH  | 8   | SHARED DISPOSITIVE POWER              |  |  |
|       | REPORTING                                     |   | -0-                                   |  |  |
|       | PERSON  |   |                                       |  |  |
|       | WITH<br>                                      |   |                                       |  |  |
| 9     | AGGREGATE AMOUN                               | T BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON |  |  |
| 10    |   | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |                                       |  |  |
| 11    | PERCENT OF CLAS                               | S REPRES  | ENTED BY AMOUNT IN ROW (9)            |  |  |
| 12    | TYPE OF REPORTI                               | <br>NG PERSO  | N (See Instructions)                  |  |  |
|       |   |   | SCHEDULE 13G                          |  |  |
| CUSIP | No. G0129K104                                 |   |                                       |  |  |
| 1     | NAME OF REPORTI                               | NG PERSO  | n                                     |  |  |
|       | S.S. OR I.R.S.<br>Fortress Operat             |   | CATION NO. OF ABOVE PERSON<br>ty I LP |  |  |
| 2     |   | HECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  See Instructions) (a)     (b)      |                                       |  |  |
| 3     | SEC USE ONLY                                  |   |                                       |  |  |
| 4     | CITIZENSHIP OR PLACE OF ORGANIZATION Delaware |   |                                       |  |  |
|       | NUMBER OF                                     | 5   | SOLE VOTING POWER                     |  |  |
|       | SHARES<br>BENEFICIALLY                        |   | SHARED VOTING POWER                   |  |  |
|       | OWNED BY                                      | 7   | SOLE DISPOSITIVE POWER -0-            |  |  |
|       | EACH  | <br>8   | SHARED DISPOSITIVE POWER              |  |  |
|       | REPORTING                                     | Ü   | -0-                                   |  |  |
|       | PERSON  |   |                                       |  |  |
|       | WITH  |   |                                       |  |  |
| 9     | AGGREGATE AMOUN                               | <br>T BENEFI  | CIALLY OWNED BY EACH REPORTING PERSON |  |  |

| 10    | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |          |                            |              |
|-------|---|----------|----------------------------|--------------|
| 11    | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)                                   |          |                            |              |
| 12    | TYPE OF REPORTIN  | IG PERSO | N (See Instructions)       |              |
|       |   |          |                            |              |
|       |   |          | 5                          | SCHEDULE 136 |
| CUSIE | P No. G0129K104   |          |                            |              |
| 1     | NAME OF REPORTIN  | IG PERSO | N                          |              |
|       | S.S. OR I.R.S. I  | DENTIFI  | CATION NO. OF ABOVE PERSON |              |
| 2     | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b)     |          |                            |              |
| 3     | SEC USE ONLY  |          |                            |              |
| 4     | CITIZENSHIP OR E<br>Delaware  | LACE OF  | ORGANIZATION               |              |
|       | NUMBER OF   | 5        | SOLE VOTING POWER          |              |
|       | SHARES<br>BENEFICIALLY  | 6        | SHARED VOTING POWER        |              |
|       | OWNED BY  | 7        | SOLE DISPOSITIVE POWER     |              |
|       | EACH  | <br>8    | SHARED DISPOSITIVE POWER   |              |
|       | REPORTING   | O        | -0-                        |              |
|       | PERSON  |          |                            |              |
|       | WITH  |          |                            |              |
| 9     | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON -0-                    |          |                            |              |
| 10    | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |          |                            |              |
| 11    | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) 0.0%                              |          |                            |              |
| 12    | TYPE OF REPORTING PERSON (See Instructions) CO                                      |          |                            |              |

SCHEDULE 13G

| CUSI  | P No. G0129K104   |          |                                   |  |  |  |
|---|---|----------|-----------------------------------|--|--|--|
| 1   | NAME OF REPORTING PERSON  |          |                                   |  |  |  |
|   | S.S. OR I.R.S.<br>Fortress Invest   |          | CATION NO. OF ABOVE PERSON up LLC |  |  |  |
| 2   | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (See Instructions) (a)     (b)     |          |                                   |  |  |  |
| 3   | SEC USE ONLY  |          |                                   |  |  |  |
| 4   | CITIZENSHIP OR<br>Delaware  | PLACE OF | ORGANIZATION                      |  |  |  |
|   | NUMBER OF   | 5        | SOLE VOTING POWER                 |  |  |  |
|   | SHARES<br>BENEFICIALLY  | 6        | SHARED VOTING POWER               |  |  |  |
|   | OWNED BY  | 7        | SOLE DISPOSITIVE POWER            |  |  |  |
|   | EACH<br>REPORTING   | 8        | 8 SHARED DISPOSITIVE POWER -0-    |  |  |  |
|   | PERSON  |          |                                   |  |  |  |
|   | WITH  |          |                                   |  |  |  |
| 9   | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON -0-                    |          |                                   |  |  |  |
| 10  | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (See Instructions) |          |                                   |  |  |  |
| 11  | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)                                   |          |                                   |  |  |  |
| 12 TYPE OF REPORTING PERSON (See Instructions) 00 |   |          | N (See Instructions)              |  |  |  |
|   |   |          |                                   |  |  |  |

### Item 1.

(a) Name of Issuer:

The name of the issuer is Aircastle Limited (the "Issuer").

(b) Address of Issuer's Principal Executive Offices:

The Issuer's principal executive offices are located at c/o Aircastle Advisor LLC, 300 First Stamford Place, 5th Floor, Stamford, Connecticut 06902.

Item 2.

- (a) Name of Person Filing:
- This statement is filed by:
- (i) Fortress Investment Fund III Sub LLC, a Delaware limited liability company;
- (ii) Fortress Investment Fund III Sub Two LLC, a Delaware limited liability company;
- (iii) Fortress Investment Fund III LP, a Delaware limited partnership;
- (iv) Fortress Investment Fund III (Fund B) Sub LLC, a Delaware limited liability company;
- (v) Fortress Investment Fund III (Fund B) Sub Two LLC, a Delaware limited liability company;
- (vi) Fortress Investment Fund III (Fund B) LP, a Delaware limited
  partnership;
- (vii) Fortress Investment Fund III (Fund C) Sub LLC, a Delaware limited liability company
- (viii) Fortress Investment Fund III (Fund C) LP, a Delaware limited
  partnership;
- (ix) Fortress Investment Fund III (Fund D) Sub Ltd, a Cayman Islands corporation;
- (x) Fortress Investment Fund III (Fund D) L.P., a Cayman Islands partnership;
- (xi) Fortress Investment Fund III (Fund E) Sub Ltd, a Cayman Islands corporation;
- (xii) Fortress Investment Fund III (Fund E) L.P., a Cayman Islands partnership;
- (xiii) Fortress Investment Fund III (Coinvestment Fund A) Sub LLC, a Delaware limited liability company;
- (xiv) Fortress Investment Fund III (Coinvestment Fund A) LP, a Delaware limited partnership;
- (xv) Fortress Investment Fund III (Coinvestment Fund B) Sub LLC, a Delaware limited liability company;
- (xvi) Fortress Investment Fund III (Coinvestment Fund B) LP, a Delaware limited partnership;
- (xvii) Fortress Investment Fund III (Coinvestment Fund C) Sub LLC, a Delaware limited liability company;
- (xviii) Fortress Investment Fund III (Coinvestment Fund C) LP, a Delaware limited partnership;
- (xix) Fortress Investment Fund III (Coinvestment Fund D) Sub Ltd, a Cayman Islands Corporation;
- (xx) Fortress Investment Fund III (Coinvestment Fund D) L.P., a Cayman

Islands partnership;

- (xxi) Fortress Fund III GP LLC, a Delaware limited liability company;
- (xxii) Fortress Investment Fund GP (Holdings) LLC, a Delaware limited liability company;
- (xxiii) FIG LLC, a Delaware limited liability company;
- (xxiv) Fortress Operating Entity I LP, a Delaware limited partnership;
- (xxv) FIG Corp., a Delaware corporation; and
- (xxvi) Fortress Investment Group LLC, a Delaware limited liability company

The foregoing persons are hereinafter sometimes collectively referred to as the "Reporting Persons." Any disclosures herein with respect to persons other than the Reporting Persons are made on information and belief after making inquiry to the appropriate party.

(b) Address of Principal Business Office, or if none, Residence:

The address of the business office of each of the Reporting Persons is c/o Fortress Investment Group LLC, 1345 Avenue of the Americas, 46th Floor, New York, New York 10105, Attention: Michael Cohn.

(c) Citizenship:

Each of Fortress Investment Fund III Sub LLC, Fortress Investment Fund III Sub Two LLC, Fortress Investment Fund III (Fund B) Sub LLC, Fortress Investment Fund III (Fund B) Sub Two LLC, Fortress Investment Fund III (Fund C) Sub LLC, Fortress Investment Fund III (Coinvestment Fund A) Sub LLC, Fortress Investment Fund III (Coinvestment Fund B) Sub LLC, Fortress Investment Fund III (Coinvestment Fund C) Sub LLC, Fortress Fund III GP LLC, Fortress Investment Fund GP (Holdings) LLC, FIG LLC, and Fortress Investment Group LLC is a limited liability company organized under the laws of the State of Delaware. Each of Fortress Investment Fund III LP, Fortress Investment Fund III (Fund B), LP Fortress Investment Fund III (Fund C) LP, Fortress Investment Fund III (Coinvestment Fund A) LP, Fortress Investment Fund III (Coinvestment Fund B) LP, Fortress Investment Fund III (Coinvestment Fund C) LP, and Fortress Operating Entity I LP is a limited partnership organized under the laws of the State of Delaware. Each of Fortress Investment Fund III (Fund D) Sub Ltd, Fortress Investment Fund III (Fund E) Sub Ltd, and Fortress Investment Fund III (Coinvestment Fund D) Sub Ltd is a corporation organized under the laws of the Cayman Islands. Each of Fortress Investment Fund III (Fund D) L.P., Fortress Investment Fund III (Fund E) L.P., and Fortress Investment Fund III (Coinvestment Fund D) L.P. is a limited partnership organized under the laws of the Cayman Islands. FIG Corp. is a corporation organized under the laws of the State of Delaware.

- (d) Title of Class of Securities:
  - Common Shares, par value \$0.01 per share (the "Common Shares")
- (e) CUSIP Number:

G0129K104

Item 3. If this statement is filed pursuant to ss.ss.240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:

- (a) [ ] Broker or dealer registered under section 15 of the Act (15 U.S.C. 780)
- (b) [ ] Bank as defined in section 3(a)(6) of the Act (15 U.S.C. 78c).
- (c) [] Insurance company as defined in section 3(a)(19) of the Act (15 U.S.C. 78c).
- (d) [ ] Investment company registered under section 8 of the Investment Company Act of 1940 (15 U.S.C. 80a-8).
- (e) [ ] An investment adviser in accordance with ss.240.13d-1(b)(1)(ii)(E).
- (f) [ ] An employee benefit plan or endowment fund in accordance with ss.240.13d-1(b)(1)(ii)(F).
- (g) [ ] A parent holding company or control person in accordance with ss.240.13d-1(b)(1)(ii)(G).
- (h) [ ] A savings association as defined in Section 3(b) of the Federal Deposit Insurance Act (12 U.S.C. 1813).
- (i) [ ] A church plan that is excluded from the definition of an investment company under section 3(c)(14) of the Investment Company Act of 1940 (15 U.S.C. 80a-3).
- (j) [ ] Group, in accordance with ss.240.13d-1(b)(1)(ii)(J).

#### Item 4. Ownership.

- A. Fortress Investment Fund III Sub LLC
  - (a) Amount beneficially owned: 0
  - (b) Percent of class: 0.0%
  - (c) (i) Sole power to vote or direct the vote:  $\ensuremath{\text{0}}$ 
    - (ii) Shared power to vote or direct the vote: 0
    - (iii) Sole power to dispose or direct the disposition: 0
    - (iv) Shared power to dispose or direct the disposition: 0
- B. Fortress Investment Fund III Sub Two LLC
  - (a) Amount beneficially owned: 0
  - (b) Perent of class: 0.0%
    - (i) Sole power to vote or direct the vote:  $\ensuremath{\text{0}}$
    - (ii) Shared power to vote or direct the vote: 0
    - (iii) Sole power to dispose or direct the disposition:  $\ensuremath{\text{0}}$
    - (iv) Shared power to dispose or direct the disposition: 0
- C. Fortress Investment Fund III LP
  - (a) Amount beneficially owned: 0
  - (b) Percent of class: 0.0%
  - (c) (i) Sole power to vote or direct the vote: 0
    - (ii) Shared power to vote or direct the vote: 0
    - (iii) Sole power to dispose or direct the disposition:  $\ensuremath{\text{0}}$
    - (iv) Shared power to dispose or direct the disposition: 0
- D. Fortress Investment Fund III (Fund B) Sub LLC
  - (a) Amount beneficially owned: 0
  - (b) Percent of class: 0.0%
  - (c) (i) Sole power to vote or direct the vote:  $\boldsymbol{0}$ 
    - (ii) Shared power to vote or direct the vote: 0

(iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 E. Fortress Investment Fund III (Fund B) Sub Two LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 F. Fortress Investment Fund III (Fund B) LP (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 G. Fortress Investment Fund III (Fund C) Sub LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 H. Fortress Investment Fund III (Fund C) LP (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition 0 I. Fortress Investment Fund III (Fund D) Sub Ltd (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0J. Fortress Investment Fund III (Fund D) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 K. Fortress Investment Fund III (Fund E) Sub Ltd (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0

L. Fortress Investment Fund III (Fund E) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 M. Fortress Investment Fund III (Coinvestment Fund A) Sub LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 N. Fortress Investment Fund III (Coinvestment Fund A) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 O. Fortress Investment Fund III (Coinvestment Fund B) Sub LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 P. Fortress Investment Fund III (Coinvestment Fund B) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 Q. Fortress Investment Fund III (Coinvestment Fund C) Sub LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 R. Fortress Investment Fund III (Coinvestment Fund C) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0

(iv) Shared power to dispose or direct the disposition: 0

S. Fortress Investment Fund III (Coinvestment Fund D) Sub Ltd (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 T. Fortress Investment Fund III (Coinvestment Fund D) L.P. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 U. Fortress Fund III GP LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 V. Fortress Investment Fund GP (Holdings) LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 W. FIG LLC (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 X. Fortress Operating Entity I LP (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0(iv) Shared power to dispose or direct the disposition: 0 Y. FIG Corp. (a) Amount beneficially owned: 0 (b) Percent of class: 0.0% (c) (i) Sole power to vote or direct the vote: 0 (ii) Shared power to vote or direct the vote: 0 (iii) Sole power to dispose or direct the disposition: 0 (iv) Shared power to dispose or direct the disposition: 0 Z. Fortress Investment Group LLC

(a) Amount beneficially owned: 0
(b) Percent of class: 0.0%

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- (c) (i) Sole power to vote or direct the vote: 0
  - (ii) Shared power to vote or direct the vote: 0
  - (iii) Sole power to dispose or direct the disposition: 0
  - (iv) Shared power to dispose or direct the disposition: 0

Item 5. Ownership of Five Percent or Less of a Class.

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be beneficial owner of more than 5 percent of the class of securities, check the following [x].

Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not applicable.

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company.

Not applicable.

Item 8. Identification and Classification of Members of the Group.

Not applicable.

Item 9. Notice of Dissolution of Group.

Not applicable.

Item 10. Certification.

Not applicable.

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III LP

By: FORTRESS FUND III GP LLC
 its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks
Title: Secretary

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (FUND B) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks
Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (FUND C) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (FUND D) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (FUND E) LP

By: FORTRESS FUND III GP LLC

its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (COINVESTMENT FUND A) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (COINVESTMENT FUND B) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

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Name: David N. Brooks Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (COINVESTMENT FUND C) LP

By: FORTRESS FUND III GP LLC its general partner

By: /s/ David N. Brooks

-----

Name: David N. Brooks Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND III (COINVESTMENT FUND D) L.P.

By: FORTRESS FUND III GP LLC
 its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS FUND III GP LLC

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT FUND GP (HOLDINGS) LLC

By: /s/ David N. Brooks

Name: David N. Brooks

Title: Secretary

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FIG LLC

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary and Vice President

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS OPERATING ENTITY I LP

By: FIG CORP.

its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary and Vice President

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FIG CORP.

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary and Vice President

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

FORTRESS INVESTMENT GROUP LLC

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary and Vice President

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III Sub LLC

By: FORTRESS INVESTMENT FUND III LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

-----

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III Sub Two LLC

By: FORTRESS INVESTMENT FUND III LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Fund B) Sub LLC

By: FORTRESS INVESTMENT FUND III (Fund B) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Fund B) Sub Two LLC

By: FORTRESS INVESTMENT FUND III (Fund B) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

-----

Name: David N. Brooks Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Fund C) Sub LLC

By: FORTRESS INVESTMENT FUND III (Fund C) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

-----

Name: David N. Brooks Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Fund D) Sub Ltd

By: /s/ David N. Brooks

-----

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Fund E) Sub Ltd

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Coinvestment Fund A) Sub LLC

By: FORTRESS INVESTMENT FUND III (Coinvestment Fund A) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Coinvestment Fund B)  $\operatorname{Sub}\ \operatorname{LLC}$ 

By: FORTRESS INVESTMENT FUND III (Coinvestment Fund B) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

-----

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify

that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Coinvestment Fund C) Sub LLC

By: FORTRESS INVESTMENT FUND III (Coinvestment Fund C) LP, its sole member

By: FORTRESS FUND III GP LLC, its general partner

By: /s/ David N. Brooks

\_\_\_\_\_

Name: David N. Brooks

Title: Secretary

#### SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 10, 2012

Fortress Investment Fund III (Coinvestment Fund D) Sub Ltd

By: /s/ David N. Brooks

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Name: David N. Brooks Title: Secretary