FORM 4

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Respon	ses)															
Name and Address of Reporting Person * Arlon Valencia Holdings LLC				2. Issuer Name and Ticker or Trading Symbol ALICO INC [alco]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				•			
(Last) (First) (Middle) C/O ARLON GROUP 277 PARK AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 07/08/2014					Ŀ	below)	Officer (give	title		ther (specify	below)		
NEW YO		10172		4. If Amenda Filed(Month/E		te Or	iginal		A	Applic _X_ Fo	dividual or cable Line) form filed by O	One Rep	orting Pers	son	1		
(City)	(S	tate) (Zip))	Table I -	Non-De	rivat	tive Secu	rities	Acquir	red,	Disposed	of, or	Benefici	ally Owne	d		
1.Title of S (Instr. 3)	l	2. Transaction Date [Month/Day/Year)	Exect any	Deemed ution Date, if nth/Day/Year)	3. Transac Code (Instr. 8		4. Secur Acquired Dispose (Instr. 3.	d (A) d of (D)	Sec Ben Foll	lowing Rep	s Cally Owned Fig Reported I		` /	direct ficial ership		
					Code	v	Amount	(A) or (D)	Price		nsaction(s) str. 3 and 4		or Indi (I) (Instr.	Ì	. 4)		
Alico, Inc Common Par Value	Stock, (07/08/2014	07/0	8/2014	A ⁽¹⁾		750	A	\$ 37.49	2,5	86		D				
Reminder: directly or		a separate line for e	ach cla	ass of securition	es benefi	cially	owned										
						ini re	formation quired t	on co	ntaine spond	d in unle	the colle this form ss the fo trol numb	n are rm di	not		C 1474 (9-02)		
				ative Securitio	_		_				-	l					
1. Title of Derivative Security (Instr. 3)		e (Month/Day/Ye	Ex ar) an	A. Deemed secution Date, y Month/Day/Yea	Code	,	5. Numb of Deriva Securi Acqui (A) or Dispo of (D) (Instr. 4, and	er ative atives red sed 3,	6. Date and Exp	oiratio	on Date	Amor Unde Secur	. 3 and	Derivativ Security (Instr. 5)	f 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
					Cod	le V	V (A)		Date Exercisa		Expiration Date		Amount or Number of Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Arlon Valencia Holdings LLC C/O ARLON GROUP 277 PARK AVENUE NEW YORK, NY 10172	X					

Signatures

BY: Arlon Food and Agriculture Partners LP, its sole member	07/08/2014
**Signature of Reporting Person	Date
BY: Arlon Food and Agriculture Associates LLC, its general partner	07/08/2014
**Signature of Reporting Person	Date

Date
07/08/2014
Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

 The shares of the Company's common stock being reported in this Form 4 were issued to Benjamin D. Fishman, an employee of an affiliate of Arlon Food and Agriculture Advisors LLC, as nominee on behalf of Arlon Food and Agriculture Advisors LLC, and is

 (1) required to transfer such shares to Arlon Valencia Holdings LLC (Collectively, "Arlon"). Mr. Fishman is serving as a director of the
- (1) required to transfer such shares to Arlon Valencia Holdings LLC (Collectively, "Arlon"). Mr. Fishman is serving as a director of the Company on behalf of Arlon and received the shares of the Company's common stock, as nominee on behalf of Arlon, in connection with such service on the Company's board of directors.

Remarks

These shares were issued under the 2013 Incentive Equity Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.