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File # NGO15 - 321-3

00451876

3702/0014 87 006 Page 1 of 2 2000-06-20 11:24:49

Cook County Recorder

23.50



Form BCA-5.10 NFP-105.10

(Rev. April 1995)

George H. Pyan

Secretary of State.

Department of Business Scratices

Springfield, IL 62756

Telephone (217) 782-3647

http://www.sos.state.il.us

STATEMENT OF
CHANGE
OF REGISTERED AGENT
--AND/OR-REGISTERED
OFFICE

FILED

APR 2 6 2000

JESSE WHITE SECRETARY OF STATE

SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date

4-26-2000

Filing Fee

\$5

Approved:

7 7

Remit payment in check or money order, payable to "Secretary of State."

Type or print in black ir only.
See reverse side for signature(s

COOK EQUINTY RECORDER

EUGENE "GENE" MOORE

1.	CORPORATE NAME:	ast Ridge	Conde	MINCUM	Asso	<u> platica</u>	SKOKIE OFFI	<u> </u>
2.	STATE OR COUNTRY O			Illing	•	Ox		· .
3.	Name and address of the registered agent and registered office as they appear on the records of the office of the Secretary of State (before change):							
	Registered Agent	Renald First Name		Middle Na	_		Last Name	
	Registered Office 77 W Washing Number Street		Suite No. (A P.O. Box alone is not acceptable) GOGOス)	
`	Name and address of the	City		ZIP Coo		after all ch	County anges herein re	ported

Kass Registered Agent Last Name Middle Name 3400 Ragne Sugar 2000 Registered Office Suite No. (A P.O. Box alone is not acceptable) Street Number Cook 60G17 Chica County ZIP Code 2/4 City

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The address of the registered office and the address of the busin will be identical.	ness office of the registered agent, as changed
6. The above change was authorized by: ("X" one box only)	ii Control of the second of th
a. By resolution duly adopted by the board of directors	(Note 5)
b. By action of the registered agent.	(Note 6)
	* "
NOTE: When the registered agent changes, the signatures of both 7. (If authorized by the board of directors sign have Const.)	h president and assess
The undersigned corpo ation has caused this statement to be swhom affirms, under penalties of perjury, that the facts stated herei	
Dated × 19.	÷
attested by X inda Marin by X 9	(Exact Name of Corporation)
XLINIA MORA SOLITION	gnature of President or Vice President)
(Type or Print Name and Title)	
	(Type or Print Name and Title)
(If change of registered office by registered agent, sign here See M. The undersigned, under penalties of perjury, affirms that the factors	ote 6)
Dated .	ots stated herein are true.
19,	An alteria
(Sig	ture of Registered Agent of Record)
	· O _/
NOTES	4
_	0,
registered office and the office address of the registered agent.	Hust-be-the same control of the same of th
The registered office must include a street or road address; a pos	t office box number alone strot acceptable.
A corporation cannot act as its own registered agent.	**
4. If the registered office is changed from one county to spoth or the	
4. If the registered office is changed from one county to another, the of deeds of the new county a certified copy of the articles of incorpe of change of registered office. Such certified copies may be obtained.	n the corporation must file with the recorder
of change of registered office. Such certified copies may be obta	ained ONLY from the Secretary of State
Any change of registered agent must be by regulation and an at-	and the second state of the second state.
5. Any change of registered agent must be by resolution adopted by then be signed by the president (or vice-president) and by the se	cretary (or an assistant secretary).
The registered agent may report a change of the registered offic registered agent. When the agent reports such a change, this st	one we seem to a state of the s
agent. May b.	the registered
The levin lehrman	
Julie Levin Lehrman (101) 135.12 1411 Westack Rd Deerfield, Decoro	e e e e e e e e e e e e e e e e e e e
135.12	
1. Derfield Dr. 60015	