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2000-06-26 13:17:38

Cook County Recorder

23.50





Form BCA-5.10 NFP-105.10

(Rev. Jan. 1999)

Jesse White
Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-3647
http://www.sos.state.il.us

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

## FILED

MAY 15 2000

JESSE WHITE SECRETARY OF STATE

## SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date MAY 15 2000

Filing Fee

S 5

Approved:

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

		nt in black ink only. side for signature(s).	
1. CORPORATE NAME:	N ENTER GR HINN	NOIAL SOLUTIONS, INC.	
2.—STATE-OR-COUNTRY O	F INCORPORATION:	LLINOIS	<u></u>
3. Name and address of the of the Secretary of State (	registered agent and before change):	registered office as they appear	on the records of the office
-	LYNN	HARIE	Viscini
Registered Agent -	First Name	Middle Name	Last Name
Registered Office	999 PLAZA Number Street	DR SUITE 850	
	SCHAUMBURG	(001.73	<u> </u>
<del>-</del>	City	ZIP Code	County
4. Name and address of the	registered agent and i	registered office shall be (after a	Il changes herein reported):
Registered Agent	DRUCE		KOSENLORS
	First Name	Middle Name	Last Name
Registered Office	499 PLAZA D	e Suite 850	
15011	Number Str	eet Suite No. (A P.O. Box a	ione is not acceptable)
	SCHAUM BURG	L 60173	
	City	ZIP Code	County 61

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5.	The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
6.	The above change was authorized by: ("X" one box only)
	a. Sy resolution duly adopted by the board of directors. (Note 5)
	b.   By action of the registered agent.   (Note 6)
NC	TE: When the registered agent changes, the signatures of both president and secretary are required.
7.	(If authorized by the board of directors, sign here. See Note 5)
wh	The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of om affirms, under penalties of perjury, that the facts stated herein are true.
Da	ted Way 2, 2000 CENTER for Financial Solutions / NCOLPORATED (Year) LEXAST Name of Corporation)
atte	ested by level land by
	(Signature of President or Vice President)
	SENNIEL LAND- SELETALY BRUCE ROSENAGES - PRESIDENT
	(Type or Print Name and Title) (Type or Print Name and Title)
(If a	change of registered office by registered agent, sign here. See Note 6)
	The undersigned, under penalties of perjury, affirms that the facts stated herein are true.
Da	ted
	(Month & Day) (Year) (Signature of Registered Agent of Record)
	NOTES
1.	The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2.	
	The registered office must include a street or road address; a post office box number alencis not acceptable.
3.	A corporation cannot act as its own registered agent.
<ul><li>3.</li><li>4.</li></ul>	

then be signed by the president (or vice-president) and by the secretary (or an assistant secretary).

The registered agent may report a change of the registered office of the corporation for which he or she is

registered agent. When the agent reports such a change, this statement must be signed by the registered

agent.

6.