

Form LP 1108C
(Rev. Jan. 1995)

3876/0030 39 005 Page 1 of 4
2000-07-24 15:06:58
Cook County Recorder 27.50



LPR306/28/00+01:6863:
SOSIL S011315 FILED 1108
15.00 MU

FILING DEADLINE IS
PRIOR TO 07/01/00

\$15 Filing Fee
Submit Typed
Duplicate

FORMS OF PAYMENTS
Payments must be made
by certified check,
cashier's check, Illinois
attorney's check, Illinois
C.P.A.'s check or money
order, Payable to
"Secretary of State"
DO NOT SEND CASH!

COOK COUNTY
RECORDER
EUGENE "GENE" MOORE
ROLLING MEADOWS

SECRETARY OF STATE - STATE OF ILLINOIS
LIMITED PARTNERSHIP BIENNIAL RENEWAL REPORT

DO NOT MAKE CHANGES ON THIS FORM. IF CHANGES ARE NECESSARY, AMENDMENT
FORM LP 202 (ILLINOIS) OR LP 905 (FOREIGN) AND THE \$25 FEE IS REQUIRED.

Registered Agent name and Registered Agent's office address.

VISWANATHAM SUSARLA
22 ROLLING HILLS DRIVE
BARRINGTON HILLS, IL 60010



Limited Partnership Name: THE SUSARLA SECOND FAMILY LIMITED PARTNERSHIP

Secretary of State's Assigned File Number: S011315
Federal Employer Identification Number: 364093156
State of Jurisdiction: ILLINOIS

If Foreign attach a current Certificate of Good Standing

I affirm this limited partnership still exists in Illinois.

Address of office where records required by Section 104 (Illinois) or Section 902 (Foreign) are kept:

22 ROLLING HILLS DRIVE COOK
BARRINGTON HILLS, IL 60010

The undersigned affirms, under penalty of perjury, that the facts stated herein are true.

Renewal report must be signed by a general partner.

Viswanatham Susarla
(Signature)

VISWANATHAM SUSARLA
(Type or Print Name and Title)

GENERAL PARTNER
(Name of General Partner if a corporation or other entity)

(Signature must be in black ink on an original document. Carbon copy, photo copy or rubber stamp signature may only be used on conformed copies).

RETURN TO:
Secretary of State
Department of Business Services
Limited Partnership Division
Room 357 Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8960

000032

Handwritten initials and date: 4/23/04

VISWANATHAM SUSARLA
22 ROLLING HILLS DRIVE
BARRINGTON HILLS, IL 60010

COOK

Property of Cook County Clerk's Office

LPR306/28/00:01:6864:
SOSIL 5011315 FILED 202
25.00 MIU

Filing Fee \$25

SUBMIT IN DUPLICATE!

Return to: Department of
Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, IL 62756
Telephone: (217) 785-8960
http://www.sos.state.il.us.

All correspondence regard-
ing this filing will be sent to
the registered agent of the
limited partnership unless a
self-addressed envelope with
pre-paid postage is included.

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

CERTIFICATE OF AMENDMENT
TO THE
CERTIFICATE OF LIMITED PARTNERSHIP
(Illinois limited partnership)
(Please type or print clearly)

1. Limited partnership's name: THE SUSARLA SECOND FAMILY LIMITED PARTNERSHIP
2. File number assigned by the Secretary of State: 5011315
3. Federal Employer Identification Number (F.E.I.N.): 364093156
4. The certificate of limited partnership is amended as follows:
(Check **all** applicable changes here and specify them in item 5.)
(Address changes, P.O. Box alone and c/o are unacceptable)
 - a) Admission of a new general partner (give name and business address in item 5 on reverse).
 - b) Withdrawal of a general partner (give name in item 5 on reverse).
 - c) Change of registered agent and/or registered agent's office (give new name and address, **including county** on item 5 on reverse).
 - d) Change in the address of the office at which the records required by Section 201 of the Act are kept (give new address, **including county**, in item 5 on reverse).
 - e) Change in the general partners name and/or business address (give name and new address in item 5 on reverse).
 - f) Change in the partners' total aggregate contribution amount (give new dollar amount in item 5 on reverse).
 - g) Change in limited partnership's name (give new name in item 5 on reverse).
 - h) Change in date of dissolution (give new date in item 5 on reverse).
 - i) Other (give information in item 5 on reverse).

Form LP 202
(Rev. Jan. 1999)

5. Place Item #4 changes here:

CURRENT NAME

The Susarla Second Family Limited
Partnership

NEW NAME

SUSARLA FLP.2

LPR306/28/00:01:6864: 25.00 MU
SOSIL S011315 FILED 202

If additional space is needed for item 4, it must be continued in the same format on a plain white 8 1/2 x 11 sheet, which must be stapled to this form.

6. NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

The original certificate of amendment must be signed by a general partner, all new general partners and at least one withdrawing general partner.

SIGNATURE AND NAME

BUSINESS ADDRESS

1. Signature V. Swamathan Susarla

Number/Street 22 ROLLING HILLS DR

Type or print name and title GENERAL PARTNER

City/town BARRINGTON HILLS, IL 60010

Name of General Partner if a corporation or other entity _____

State _____ ZIP Code _____

2. Signature _____

Number/Street _____

Type or print name and title _____

City/town _____

Name of General Partner if a corporation or other entity _____

State _____ ZIP Code _____

3. Signature _____

Number/Street _____

Type or print name and title _____

City/town _____

Name of General Partner if a corporation or other entity _____

State _____ ZIP Code _____

(Signatures must be in **BLACK INK** on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

DO NOT SEND CASH!