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2000-09-06 09:40:20
Cook County Recorder 23.00



00688230

Form LP 902
(Rev. Jan. 1999)

Filing Fee \$75

SUBMIT IN DUPLICATE!

File # S016892

Assigned by
Secretary of State

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>

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

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

APPLICATION FOR ADMISSION
TO TRANSACT BUSINESS
(foreign limited partnership)
(Please type or print clearly)

- Limited partnership's name: Related Management Company, L. P.
- The address, **including county**, of the office at which records required by Section 104 are to be kept is:
(P.O. Box alone & c/o are unacceptable:) _____
The Related Companies, L.P., 625 Madison Avenue, New York, NY 10022, Attn: Legal Department.
- Federal Employer Identification Number (F.E.I.N.): 13-3544952
- The limited partnership was formed in the jurisdiction of: New York
on: 01/28/1992 and validly exists there as a limited partnership on this file date.
(attach current certificate of existence from that jurisdiction)
- Admitting name, if any, under which the limited partnership will transact business in Illinois: _____
Related Management, L.P.
- An application to adopt an assumed name, form LP 108, is attached: Yes No
- The limited partnership's registered agent's name and registered office address is:
Registered agent:
First name CT Corporation System Middle name _____ Last name _____
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 208 So. LaSalle Street _____ Suite # _____
City Chicago County Cook Illinois ZIP Code 60604
- The undersigned agree(s) to keep the records detailed in Number 2 until the limited partnership's registration in this state is cancelled.

LPR308/16/00:01:8622: 125.00 CK02
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BOX 170

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Form LP 902

LPR308/16/00:01:8622: 125.00 CK02
SDSIL SD16892 FILED 902

9. Dissolution date: Perpetual or _____
(month, day, year)

10. The Illinois Secretary of State is hereby appointed the agent of the limited partnership for service of process under the circumstances set forth in Section 909(b) of RULPA.

NAME(S) & BUSINESS ADDRESS(ES) OF ALL GENERAL PARTNER(S)

1. General Partner's name RCMP Management, Inc.

Number/Street c/o The Related Companies, L.P., 625 Madison Avenue,

City/Town New York

State New York ZIP Code _____

2. General Partner's name _____

Number/Street _____

City/Town _____

State _____ ZIP Code _____

3. General Partner's name _____

Number/Street _____

City/Town _____

State _____ ZIP Code _____

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

The original application to transact business must be signed by at least one general partner.

Signature *Jeff Brodsky*

Type or print name and title JEFFREY BRODSKY, PRESIDENT

Name of General Partner if a corporation or other entity _____

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

FORMS OF PAYMENT:

Payment 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!

BOX 170