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Cook County Recorder

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23.50 - 1,17-2

File # 5812 627

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



COOK COUNTY RECORDER EUGENE "GENE" MOORE ROLLING MEADOWS

FILED

ADG 23 2000

JESSE WHITE SECRETARY OF STATE SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date

8-23-00

Filing Fee

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Approved:

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

Type or print in black ink day. See reverse side for signature().

| 1. | CORPORATE NAME:  | BioSafe Medi                         | cal Techn          | ologies, Inc.        | 46                                    |  |  |
|----|--|--------------------------------------|--------------------|----------------------|---------------------------------------|--|--|
| 2. | STATE OR COUNTRY O   | F INCORPORA                          | ATION:             | Illinois             |                                       |  |  |
| 3. | Name and address of the of the Secretary of State  | registered age<br>before change      | nt and regi<br>) : | stered office as the | y appear on the records of the office |  |  |
|    | Registered Agent   | David                                |                    |                      | Fleisner                              |  |  |
|    | , g  | First Name                           |                    | Middle Name          | Last Name                             |  |  |
|    | Registered Office  | 300 Knightsbridge Barkway, Suite 150 |                    |                      |                                       |  |  |
|    |  | Number                               | Street             | Suite No. (A P.      | O. Box alone is not acceptable)       |  |  |
|    |  | Lincolnshi                           | re                 | 60069-3619           | Lake                                  |  |  |
|    |  | City                                 |                    | ZIP Code             | County                                |  |  |
| 4. | Name and address of the registered agent and registered office shall be (after all changes herein reported): |                                      |                    |                      |                                       |  |  |
|    | Registered Agent   | David                                |                    | C.                   | Fleisner                              |  |  |
|    | 9  | First Name                           |                    | Middle Name          | Last Name                             |  |  |
|    | Registered Office 100 Field Drive, Suite 240   |                                      |                    |                      |                                       |  |  |
|    |  | Number                               | Street             |                      | O. Box alone is not acceptable)       |  |  |
|    |  | Lake Forest                          |                    | 60045                | Lake                                  |  |  |
|    |  | City                                 |                    | ZIP Code             | County                                |  |  |

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| 5.   | The address of the registered office and the address of the business office of the registered agent, as changed<br>will be identical. |   |  |  |  |  |
|--|---|---|--|--|--|--|
| 6.   | box only)   |   |  |  |  |  |
|  | a. 🗓 By resolution duly adopted by the board  | of directors. (Note 5)  |  |  |  |  |
|  | b.   By action of the registered agent.   | (Note 6)  |  |  |  |  |
|  |   |   |  |  |  |  |
| ГОИ  | TE: When the registered agent changes, the sign   | natures of both president and secretary are required.                                     |  |  |  |  |
| 7.   | (If authorized by the board of directors, sign her  |   |  |  |  |  |
| who  | The undersigned corporation has caused this stam affirms, under penalties of perjury, that the fac                                    | atement to be signed by its duly authorized officers, each of its stated herein are true. |  |  |  |  |
| Date   |   | BioSafe Medical Technologies, Inc.  |  |  |  |  |
|  | (Month & Day) (Year)  | (Exact Name of Corporation)   |  |  |  |  |
| attes  | sted by   | by  |  |  |  |  |
|  | (Signature of Secretary or Assistant Secretary)   | (Signature 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 I er 1 See Note 6) |   |   |  |  |  |  |
|  | The undersigned, under penalties of perjury, affi   | irms that the facts stated herein are true.   |  |  |  |  |
| Date   | ed August 15 , 2000   | Maure Plesser   |  |  |  |  |
|  | (Month & Day) (Year)  | (Sigrature of Registered Agent of Record)   |  |  |  |  |
|  |   | Opp.  |  |  |  |  |
|  | N   | IOTES   |  |  |  |  |

- 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 alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of *registered agent* must be by resolution adopted by the board of directors. This statement must then be signed by the president *(or vice-president)* and by the secretary *(or an assistant secretary)*.
- 6. 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.