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2000-11-16 12:52:32
Cook County Recorder 23.50

SUBMIT IN DUPLICATE!



File # S017081

Assigned by
Secretary of State

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.

GEORGE H. RYAN
SECRETARY OF STATE
STATE OF ILLINOIS

APPLICATION FOR ADMISSION
TO TRANSACT BUSINESS
(foreign limited partnership)

1. Limited partnership's name: RPG Limited Partnership

2. 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:) 30 Court of Cobblestone, Northbrook, IL 60062, Cook County

3. Federal Employer Identification Number (F.E.I.N.): 36-4392541

4. The limited partnership was formed in the jurisdiction of: Delaware
on: 9/15/00 and validly exists there as a limited partnership on this file date.

5. Admitting name, if any, under which the limited partnership will transact business in Illinois: _____

6. An application to adopt an assumed name, form LP 108, is attached Yes No

7. The limited partnership's registered agent's name and registered office address is:
Registered agent:
First name Timothy Middle name G. Last name Carroll
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 70 West Street Madison Suite # 620
City Chicago County Cook State Illinois Zip Code 60602

8. The undersigned agree(s) to keep the records detailed in Number 2 until the limited partnership's registration in this state is cancelled.

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9. Dissolution date: Perpetual or 12/31/2048
(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)

General Partner's name Rita Golub

Number/Street 30 Court of Cobblestone

City/Town Northbrook

State IL Zip Code 60062

General Partner's name Paula Harris

Number/Street 1244 Country Lane

City/Town Northbrook

State IL Zip Code 60062

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 *Rita Golub*

Type or print name and title Rita Golub, General Partner

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."

RETURN TO:

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

DO NOT SEND CASH!

*After recording
Mail to:*

*Carroll, Kline & Wall
70 West Madison Street Suite 620
Chicago, Illinois 60602
Attn: MG*

