UNOFFICIAL COMM17498

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N 6070-565-8 File #

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**

2001-02-13 15:24:57 Cook County Recorder 23.50



FILED

JAN 12 2001

JESSE WHITE SECRETARY OF STATE SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date

JAN 12 2001

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Approved: 🖋

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

Type or print in black rak only. See reverse side for signal are

1.	CORPORATE NAME: YA	LE AND MAR	LYN KAPLA	N FAMILY FOUNDAL	70N	
2.	STATE OR COUNTRY OF	F INCORPOF	RATION: —	Illinois	<u>'</u>	
3.	Name and address of the registered agent and registered office as they appear or the records of the office of the Secretary of State (before change):					
	Registered Agent	Nathan	M. Grossm	<u>an</u>	<u> </u>	
		First Name		Middle Name	Last N'ame	
	Registered Office	_ 180 N.	Stetson A	ve., Ste. 850		
		Number	Street	Suite No. (A P	O. Box alone is not acceptable)	
		Chicago	o, IL <u>606</u>	01	<u> Cook</u>	
	•	City		ZIP Code	County	
4.	Name and address of the	registered ag	ent and regi	istered office shall b	e (after all changes herein reported):	
			Nathan M. Grossman			
	Tiegistered Agent	First Name		Middle Name	Last Name	
1	MAIL Registered office	233 N. M Number	lichigan Street	Avenue, Ste. Suite No. (A F	1720 P.O. Box alone is not acceptable)	
ſ		Chicago,	IL 606	501	<u>Cook</u>	
		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, will be identical.					
6.	The above change was authorized by: ("X" one bo	ox only)				
	a. By resolution duly adopted by the board of	• •				
	b. xx By action of the registered agent.	(Note 6)				
7.	(If authorized by the board of directors, sign here.	ement to be signed by its duly authorized officers, each of				
Date	ed Q					
Dan	(Month & Day) (Year)	(Exact Name of Corporation)				
atte	sted by	by				
	(Signature of Secretary or Assistant Secretary)	(Signature of President or Vice President)				
	(Type or Print Name and Tit(e)	(Type or Print Name and Title)				
(If change of registered office by registered agent sign here. See Note 6) The undersigned, under penalties of perjury, af irms that the facts stated herein are true.						
Date	ed December (Year) (Month & Day) (Year)	(Signature of Registered Agent of Record)				
	NC	OTES CONTRACTOR OF THE STATE OF				
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 agent. When the agent reports such a agent.	registered office of the corporation for which he or she is change, this statement must be signed by the registered				
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