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2001-08-03 12:26:32

Cook County Recorder

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File # N 5313-202-2

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

FILED

JUL 1 0 2001

JESSE WHITE SECKETARY OF STATE

SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date 7// o /

Filing Fee \$

Approved:

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

Type or print in black ink only. See reverse side for signal right.

| 1. CORPORATE NAME: | | | -1 | Marria de Dhaon des III de | - Tn | |
|--|--|--------------------|---------------------|---|------------------------------------|--|
| 3. Name and address of the registered agent and registered office as they appear on the records of the of the Secretary of State (before change): Registered Agent Clarence J Crooks First Name Middle Name Last Name Registered Office Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60601 Cook City ZIP Code County A. Name and address of the registered agent and registered office shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the street of the shall be (after all changes herein reported by the shall be calculated by the s | 1. | CORPORATE NAME: — | | maywood-Phoenix Home | i, inc | |
| of the Secretary of State (before change): Registered Agent Clarence J Crooks First Name Middle Name Last Name 303 E. Wacker Drive, Suite 1107 Registered Office Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60601 County A. Name and address of the registered agent and registered office shall be (after all changes herein report Registered Agent Bruce B. Jackson First Name Middle Name Last Name Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | 2. | STATE OR COUNTRY O | F INCORPORA | TION: Illinois | <u>S</u> | |
| Registered Office Registered Agent Registered Agent Registered Office Suite No. (A P.O. Box alone is not acceptable) Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | 3. | | | | ppear on the records of the office | |
| Registered Office 303 E. Wacker Drive, Suite 1107 | | Registered Agent - | | J | | |
| Chicago 60601 Cook City ZIP Code County 4. Name and address of the registered agent and registered office shall be (after all changes herein report Registered Agent Bruce B. Jackson Last Name Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | | | | | | |
| Chicago City ZIP Code Cook County 4. Name and address of the registered agent and registered office shall be (after all changes herein report Registered Agent First Name Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago Cook Cook | | Registered Office | | | | |
| City ZIP Code County 4. Name and address of the registered agent and registered office shall be (after all changes herein report Registered Agent Bruce B. Jackson Last Name Middle Name Last Name Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | | | Number | Street Suite No. (A P.U. I | Box alone is not acceptable) | |
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| Registered Agent Bruce B. Jackson First Name Middle Name Last Name Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | | | City | ZIP Code | County | |
| Registered Office 150 N Wacker Drive, Suite 900 Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | Name and address of the registered agent and registered office shall be (after all changes herein reported): | | | | | |
| Number Street Suite No. (A P.O. Box alone is not acceptable) Chicago 60606 Cook | | Registered Agent | Bruce First Name | B . Middle Name | | |
| | | Registered Office | | cker Drive, Suite 900 Street Suite No. (A P.O. l |) Box alone is not acceptable) | |
| | MAIL | 770 | | | | |

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|---|---|---|--|--|--|--|
| 5. | The address of the registered office and the address of the busine will be identical. | ess office of the registered agent, as changed, | | | | |
| 6. | The above change was authorized by: ("X" one box only) | | | | | |
| | a. 🙀 By resolution duly adopted by the board of directors. | (Note 5) | | | | |
| | b. By action of the registered agent. | (Note 6) | | | | |
| | | | | | | |
| NOTE: When the registered agent changes, the signatures of both president and secretary are required. | | | | | | |
| 7. | (If authorized by the board of directors, sign here. See Note 5) | | | | | |
| - | The undersigned exporation has caused this statement to be si | igned by its duly authorized officers, each of | | | | |
| wh | om affirms, under per alties of perjury, that the facts stated herein | are true. | | | | |
| Πa | ted June 19. | A Phoenia Homes, Inc. | | | | |
| Da | (Month & Day) (Year) Waxwoo | d- Phoenix (Exact Name of Corporation) | | | | |
| attested by Ressult Burns le by Old | | | | | | |
| (Signature of Secretary or Assis ant Secretary) (Signature of President of Vice President) | | | | | | |
| | Roosevelt Burnside William Rev | Claude Porter | | | | |
| | (Type or Print Name and Title) | (Type or Print Name and Title) | | | | |
| | | , ,, | | | | |
| (If change of registered office by registered agent, s.gn here. See Note 6) | | | | | | |
| | The undersigned, under penalties of perjury, affirm s that the fac | cts stated herein are true. | | | | |
| Dated | | | | | | |
| | (Month & Day) (Year) (Sign | nature of Registered Agent of Record) | | | | |
| | | | | | | |
| | ' | | | | | |
| | NOTES | (C)// | | | | |
| 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 r | must be the same. | | | | |
| 2 The registered office must include a street or road address; a post office box number air ag is not acceptable. | | | | | | |
| | | Tomos box mambol and to not docoptable. | | | | |
| 3. | A corporation cannot act as its own registered agent. | | | | | |
| 4. | If the registered office is changed from one county to another, the | on the corneration must file with the recorder | | | | |
| •• | of deeds of the new county a certified copy of the articles of incorp | poration and a certified conv of the statement | | | | |
| | of change of registered office. Such certified copies may be obta | ained ONLY from the Secretary of State. | | | | |
| 5. | Any change of registered agent must be by receivily adented by | Aller broad of Pools | | | | |
| J. | Any change of registered agent must be by resolution adopted by then be signed by the president (or vice-president) and by the se | r the board of directors. This statement must | | | | |
| | and the signed by the problem to vice-presidenty and by the signed | GGIGIGIY (ULAHAMMAHI SHCIHIMIY) | | | | |
| | | Toronary (or are aborotary boorotary). | | | | |
| 6. | The registered agent may report a change of the registered office registered agent. When the agent reports such a change, this s | ce of the corporation for which he or she is | | | | |

C-135.13

agent.