

UNOFFICIAL COPY 00158149

Form LP 202
(Rev. Jan. 1999)

1793/0147 03 001 Page 1 of 4
2000-03-03 14:22:03
Cook County Recorder 27.50

Filing Fee \$25

SUBMIT IN DUPLICATE!



25.00
CER403/01/00:01:0296:
SOSIL 5005460 FILED 202

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.

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

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

CERTIFICATE OF AMENDMENT
TO THE
CERTIFICATE OF LIMITED PARTNERSHIP
(Illinois limited partnership)
(Please type or print clearly)

1. Limited partnership's name: Peterson Plaza Associates
2. File number assigned by the Secretary of State: 5005460 gml
3. Federal Employer Identification Number (F.E.I.N.): 36 3125727
4. The certificate of limited partnership is amended as follows:
(Check **all** applicable changes here and specify them in item 5.)
(Address changes, P.O. Box alone and c/o are unacceptable)
 - a) Admission of a new general partner (give name and business address in item 5 on reverse).
 - b) Withdrawal of a general partner (give name in item 5 on reverse).
 - c) Change of registered agent and/or registered agent's office (give new name and address, including county on item 5 on reverse).
 - d) Change in the address of the office at which the records required by Section 201 of the Act are kept (give new address, including county, in item 5 on reverse).
 - e) Change in the general partners name and/or business address (give name and new address in item 5 on reverse).
 - f) Change in the partners' total aggregate contribution amount (give new dollar amount in item 5 on reverse).
 - g) Change in limited partnership's name (give new name in item 5 on reverse).
 - h) Change in date of dissolution (give new date in item 5 on reverse).
 - i) Other (give information in item 5 on reverse).

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00158149

PROPERTY OF COOK COUNTY CLERK'S OFFICE

Property of Cook County Clerk's Office

PREPARED BY AND MAIL TO:

**The Kaplan Group Ltd.
180 North LaSalle Street
Suite 2805
Chicago, Illinois 60601
Attn: Joe Marz**

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Form CP 202
(Rev. Jan. 1999)

5. Place Item #4 changes here:

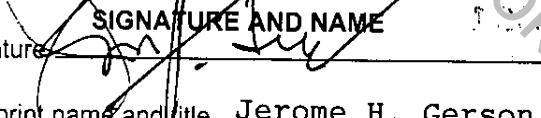
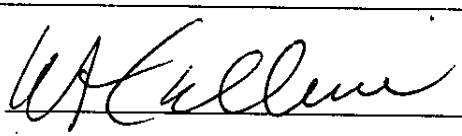
NOV 17 11/00:01:0296
05460 FILED
NEW FRONTIER CREDIT CORPORATION, an Illinois Corporation
541 North Fairbanks Court
Suite 1800
Chicago, Illinois 60611

If additional space is needed for item 4, it must be continued in the same format on a plain white 8 1/2 x 11 sheet, which must be stapled to this form.

6. NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

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

The original certificate of amendment must be signed by a general partner, all new general partners and at least one withdrawing general partner.

SIGNATURE AND NAME	BUSINESS ADDRESS
1. Signature 	Number/Street <u>35 West Wacker Drive, Suite 4300</u>
Type or print name and title <u>Jerome H. Gerson,</u> <u>Existing General Partner</u>	City/town <u>Chicago</u>
Name of General Partner if a corporation or other entity _____	State <u>Illinois</u> ZIP Code <u>60601</u>
2. Signature 	Number/Street <u>541 North Fairbanks Court</u> <u>Suite 1800</u>
Type or print name and title <u>William F. Cellini,</u> <u>President</u>	City/town <u>Chicago</u>
Name of General Partner if a corporation or other entity <u>New Frontier Credit Corporation</u>	State <u>Illinois</u> ZIP Code <u>60611</u>
3. Signature _____	Number/Street _____
Type or print name and title _____	City/town _____
Name of General Partner if a corporation or other entity _____	State _____ ZIP Code _____

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

DO NOT SEND CASH!

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