JUN 18 '02 04:19PM MCBRIDE BAKER COLES CKO =125, 201 CBR406/21/02:01:4521: SOSIL C011148 FILED

NOFFICIAL COPY

Form LP 201 (Rev. Jan. 1999)

Filing Fee \$75

SUBMIT IN DUPLICATE!

File#

C011148

Assigned by Secretary of State

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 regarding this filing will be sent to the registered agent of the imited partnership unless a seiraddressed envelope with rrepaid postage is included.

0020707267

4676/0111 49 001 Page 1 of 2002-06-25 16:14:44 23.00

Cook County Recorder

0020707267

JESSE WHITE SECRETARY OF STATE STATE OF ILLINOIS

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

| 1. | Limited nartnershin's na | Limited partnership's name: Astor Place Limited Partnership | | | | | |
|---|---|--|--------------|----------------|--|--|--|
| ١. | Fillifed barrierstrib a In | 2000 | | | | | |
| 2. | The address, including county, of the office at which the records required by Section 104 are to be kept is: (P.O. Box alone and c/o are unacceptable) 5999 New Wilke Road, Suite 504 | | | | | | |
| | | | | | | | |
| | Rolling Meadows, IL 60008 (Cook County) | | | | | | |
| 3. | Applied For | | | | | | |
| J. | reactal Chiproyer Identification (1. territor). | | | | | | |
| 4. | This certificate of limited partnership is effective on: (Check one) a) the filing date, or b) another date later than but not more than 60 days subsequent to the filing date: | | | | | | |
| 4. | | | | | | | |
| | | | | | | | |
| | to the filing date: (month, day, year) | | | | | | |
| _ | | | | | | | |
| 5. | The limited partnership | he limited partnership's registered agent's name and registered office address is: | | | | | |
| | Conjectured agents | CT Corporation System | n | | | | |
| | Registered agent: | First name | Middle name | ast name | | | |
| | Registered Office: | 208 South LaSalle Stre | et | 814 | | | |
| | (P.O. Box alone and | Number | Street | Suite # | | | |
| | c/o are unacceptable). | Chicago | Cook | Illinois 60604 | | | |
| | • | City | County | ZIP Code | | | |
| 6. | The limited partnership | e limited partnership's purpose(s) is: Invest in, acquire, hold, maintain, operate, improve, development | | | | | |
| exchange, lease and otherwise use certain real property in the Village of Wheeling, Illinois. | | | | | | | |
| | | | | | | | |
| | · | | | | | | |
| | IRS Business Code Nu | ımber is: <u>1510</u> | | | | | |
| ~ | Discolution data is- | Perpetual orJu | une 20, 2022 | | | | |
| 7. Dissolution date is: Perpetual or | | | | | | | |

UNOFFICIAL COPY

Property of Cook County Clerk's Office

0020707267 Page 2 of

UNOFFICIAL COPY

Form LP 201

201

| 8. | The total aggregate dollar amount of cash, property and services contributed by all partners is \$9,679,000 |
|----|---|
| 9. | A briefstatement of the partners' membership termination and distribution rights: |
| | Without cause or the occurrence of certain events as described in the Partnership Agreement, neither |
| | party may unilaterally terminate its membership in the limited partnership. |
| | - B B |
| | |
| | |

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

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

All general partners are required to sign the certificate of limited partnership.

| <u>C</u> | | SS ADDRESS New Wilke Road, Suite 504 |
|----------|------------------------|---|
| 04 | City/town Rolling Mead | dows |
| (| | |
| | Siete Illinois | ZIP Code 60008 |
| | 77/2 | |
| | City/town — | |
| | | 7.6 |
| | State | Z'P Code |
| | Number/Street | |
| | City/town | <u>C</u> |
| | | |
| | State | ZIP Code |
| | | Number/Street State Number/Street State |

(Signatures must be in <u>BLACK INK</u> 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."

DO NOT SEND CASH!

RETURN to LOCK BOX 266 NB

UNOFFICIAL COPY

Property of Cook County Clerk's Office