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05/29/00 4 90 001 Page 1 of 2
2002-09-06 11:39:31
Cook County Recorder 26.00

CK02

75.00

905

LPR308/30/02:01:0348:
S05IL S007200 FILED

Form LP 905
(Rev. Jan. 1999)

Filing Fee \$25

SUBMIT IN DUPLICATE!



0020981612

175-27

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.

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

CERTIFICATE OF AMENDMENT
TO THE APPLICATION FOR ADMISSION
(foreign limited partnership)

1. Limited partnership's name: H2O Plus, L.P.
2. File number assigned by the Secretary of State: S007200
3. Federal Employer Identification Number (F.E.I.N.): 363886276
4. Admitting name or assumed name, if any, under which the limited partnership is transacting business in Illinois:

5. The application for admission to transact business is amended as follows:
(Check all applicable changes here and specify them in item 6.)
(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 6 on reverse).
 - b) Withdrawal of a general partner (give name in item 6 on reverse).
 - c) Change of registered agent and/or registered agent's office (give new name and address, including county in item 6 on reverse).
 - d) Change in the address of the office at which the records required by Section 902 of the Act are kept (give new address, including county, in item 6 on reverse).
 - e) Change in the general partners name and/or business address (give name and new address in item 6 on reverse).
 - f) Change in limited partnership's name (give new name in item 6 on reverse).
 - g) Change in date of dissolution (give new date in item 6 on reverse).
 - h) Other (give information in item 6 on reverse).

(over)

BOX 170

UNOFFICIAL COPY

Form LP 905
(Rev. Jan. 1999)

New Registered Agent:
CT Corporation System
208 South LaSalle St.
Suite 814
Chicago, IL 60604
Cook County

LPR308/30/02:01:0348: 75.00 CK02
SOSIL 5007200 FILED 905

If additional space is needed, 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 *[Signature]*
Type or print name and title SCOTT OATS
CO-CEO

Street 845 W. Madison St.
City/town Chicago

Name of General Partner if a corporation or other entity H2O Plus, Inc.

State IL ZIP Code 60607

2. Signature _____
Type or print name and title _____

Street _____
City/town _____

Name of General Partner if a corporation or other entity _____

State _____ ZIP Code _____

3. Signature _____
Type or print name and title _____

Street _____
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.)

RETURN TO:
Secretary of State
Department of Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8960
<http://www.sos.state.il.us>

DO NOT SEND CASH!

BOX 170