

Filing Fee \$75

SUBMIT IN DUPLICATE!

File # C010721

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 limited  
partnership unless a self-  
addressed envelope with pre-  
paid postage is included

JESSE WHITE  
SECRETARY OF STATE  
STATE OF ILLINOIS

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



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1. Limited partnership's name: Melchiorre Family Limited Partnership

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) 392 Milford Road, Deerfield, IL 60015, Lake County

3. Federal Employer Identification Number (F.E.I.N.): Applied for

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: \_\_\_\_\_  
(month, day, year)

5. The limited partnership's registered agent's name and registered office address is:

Registered agent:	<u>Jay</u>	<u>P.</u>	<u>Tarshis</u>
	First name	Middle name	Last name
Registered Office:	<u>401 N. Michigan Avenue</u>		<u>Suite 1900</u>
(P.O. Box alone and c/o are unacceptable)	Number	Street	Suite #
	<u>Chicago</u>	<u>Cook</u>	<u>Illinois</u>
	City	County	ZIP Code
			<u>60611</u>

6. The limited partnership's purpose(s) is: SEE RIDER ATTACHED HERETO.

IRS Business Code Number is: 523900

7. Dissolution date is:  Perpetual or \_\_\_\_\_  
(month, day, year)

Box 57  
JAL

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Form LP 201  
(Rev. Jan. 1999)

8. The total aggregate dollar amount of cash, property and services contributed by all partners is

\$1,000.00

9. A brief statement of the partners' membership termination and distribution rights:

The partners' membership, termination and distribution rights are set forth in the Partnership's Agreement.

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

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

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

SIGNATURE AND NAME		BUSINESS ADDRESS	
1. Signature <u><i>Deno Melchiorre</i></u>		Number/Street <u>392 Milford Road</u>	
Type or print name and title <u>Deno Melchiorre,</u>		City/town <u>Deerfield</u>	
<u>General Partner</u>			
Name of General Partner if a corporation or other entity _____		State <u>IL</u>	ZIP Code <u>60015</u>
2. Signature _____		Number/Street _____	
Type or print name and title _____		City/town _____	
Name of General Partner if a corporation or other entity _____		State _____	ZIP Code _____
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.)

#### 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!**

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**RIDER**

**TO THE CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
MELCHIORRE FAMILY LIMITED PARTNESHIP**

- 6. The limited partnership's purpose is to invest in, hold, operate, lease, sell and in general deal with real and personal property and to engage in any and all activities related or incidental thereto and to enter into or undertake any other activities that the General Partners shall deem proper or appropriate in connection with acquiring, developing, owning, operating, leasing, managing and selling real and personal properties, to hold for investment any (including the proceeds of any sale), to reinvest any or all of such proceeds and to hold and operate any asset or assets acquired with any such proceeds.

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