

Filing Fee \$25

UPON RECORDING, MAIL TO:

SUBMIT IN DUPLICATE!

DAVID J. KENDLE
KENDLE, MIKUTA & FENSTERMAKER
221 North La Salle Street, Suite 1430
Chicago, Illinois 60601

0030128305

4824/0046 26 001 Page 1 of 2
2003-01-28 10:51:28
Cook County Recorder 26.50



0030128305

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)

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.

1. Limited partnership's name: Project 673 Limited Partnership
2. File number assigned by the Secretary of State: 5008966
3. Federal Employer Identification Number (F.E.I.N.): 36-3959668
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).

LPR309/04/02:01:0429: 25.00 MU
SDSIL 5008966 FILED 202

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Form LP 202
(Rev. Jan. 1999)

LPR309/04/02:01:0429: 25.00 MU
SOSIL S008966 FILED 202

5. Place Item #4 changes here:

Registered Agent: David J. Kendle

Registered Office: 221 N. LaSalle Street, Suite 1430
Chicago, Illinois 60601

et

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 <u><i>Kevin Gratkowski</i></u>	Number/Street <u>221 N. La Salle - Suite 1430</u>
Type or print name and title <u>Kevin Gratkowski,</u>	City/Town <u>Chicago</u>
<u>Member</u>	
Name of General Partner if a corporation or	
other entity <u>Projects LLC, an Illinois</u>	State <u>IL</u> ZIP Code <u>60601</u>
<u>Limited Liability Company</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.)

DO NOT SEND CASH!