## UNOFFICIAL C 0030421819 2003-03-28 10:29:44

Cook County Recorder

24.00

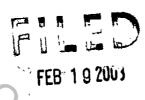
File # D 6215-503-5

Form BCA-5.10 NFP-105.10

(Rev. Jan. 1999)

Jesse White
Secretary of State
Department of Eusiness Services
Springfield, IL 62.755
Telephone (217) 784-3547
http://www.sos.state.il.us

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE



JESSE WHITE SECRETARY OF STATE



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This space for use by Secretary of State

Date 2-19-03

Filing Fee

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Approved: W

Remit payment in check or money order, payable to "Secretary of State."

Type or print in bleck ink only. See reverse side for signature(s).

CORPORATE NAME: T	HE ART STOP,	INC.				
			.0			
STATE OR COUNTRY O	F INCORPO	RATION:	LLINOIS	4		
Name and address of the registered agent and registered office as they appear on the records of the office of the Secretary of State (before change):						
Registered Agent.	JULIE		M		WO KKMAN	
3 <b>3</b>	First Name		Middle Name	•	Last Name	
Registered Office	321 N. CLARK ST.		STE 3400		C	
	Number Street		Suite No. (A P.O. Box alone is not a		is not acceptable)	
	CHICAGO		60610		СООК	
	City		ZIP Code		County	
Name and address of the	registered age	nt and regist	ered office shall	be <i>(after all cha</i>	nges herein reported)	
Registered Agent	JULIE		М		WORKMAN	
-	First Name	irst Name			Last Name	
Registered Office 191 N. WACKER DRIVE, STE. 3700						
	Street	Suite No. (A P.O. Box alone is not accepta		not acceptable)		
_	CHICAGO, IL		60606			
	City		ZIP Code		County	
	Name and address of the of the Secretary of State ( Registered Agent Registered Office Agent Age	Name and address of the registered age of the Secretary of State (before change Registered Agent Julie First Name Registered Office 321 N. CLARI Number CHICAGO City  Name and address of the registered age Registered Agent Julie First Name  Registered Agent Julie First Name  Registered Office 191 N. WACKE Number CHICAGO, IL	Name and address of the registered agent and regist of the Secretary of State (before change):  Registered Agent JULIE First Name  Registered Office 321 N. CLARK ST. Number Street  CHICAGO City  Name and address of the registered agent and regist  Registered Agent JULIE First Name  Registered Office 191 N. WACKER DRIVE, ST. Number Street  CHICAGO, IL	STATE OR COUNTRY OF INCORPORATION: ILLINOIS  Name and address of the registered agent and registered office as the of the Secretary of State (before change):  Registered Agent JULIE M. Middle Name  Registered Office 321 N. CLARK ST. STE 3400 Number Street Suite No. (A CHICAGO 60610 City ZIP Code  Name and address of the registered agent and registered office shall Registered Agent JULIE M. First Name Middle Name  Registered Office 191 N. WACKER DRIVE, STE. 3700 Number Street Suite No. (A CHICAGO, IL 60606	Name and address of the registered agent and registered office as they appear on the of the Secretary of State (before change):  Registered Agent JULIE M. Middle Name  Registered Office 321 N. CLARK ST. STE 3400  Number Street Suite No. (A P.O. Box alone in the content of the secretary of Street Agent Street Agent Street Agent Suite No. (A P.O. Box alone in the content of the registered agent and registered office shall be (after all change agent Agent JULIE M.  First Name Middle Name  Registered Office 191 N. WACKER DRIVE, STE. 3700  Number Street Suite No. (A P.O. Box alone is CHICAGO, IL 60606	



5.	The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.					
6.	6. The above change was authorized by: ("X" one box only)					
	<ul><li>a.  By resolution duly a</li><li>b.  By action of the region</li></ul>	dopted by the board of stered agent.	directors.	(Note 5) (Note 6)		
NOT	E: When the registered age	nt changes, the signatu	res of both	president and secretary are required.		
7. whor	(If authorized by the board The undersigned corporation on affirms, under penalties of	n has caused this stat	ement to b	be signed by its duly authorized officers, each of		
Date	d Q	· · · · · · · · · · · · · · · · · · ·	THE ART	STOP, INC.		
	(Month & Day)	(Year)		(Exact Name of Corporation)		
attes	ted by(Signature of Secretary	cr Assistant Secretary)	by	(Signature of President or Vice President)		
	(Type or Print N	lame and Title)		(Type or Print Name and Title)		
	ange of registered office by i The undersigned, under pen					
Date	d November 14	2002	62	mlien Norman		
	(Month & Day)	(Year)	99	(Signature of Registered Agent of Record)		
NOTES						

- 1. The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street or road address; a post office box oumber alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of *registered agent* must be by resolution adopted by the board of directors. This statement must then be signed by the president (or vice-president) and by the secretary (or an assistant secretary).
- The registered agent may report a change of the registered office of the corporation for which he or she's
  registered agent. When the agent reports such a change, this statement must be signed by the registered
  agent.