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File # 59125583

Form **BCA-5.10**
NFP-105.10
(Rev. Jan. 1999)



0315749104

Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 06/06/2003 11:16 AM Pg: 1 of 2

Jesse White
Secretary of State
Department of Business Services
Springfield, IL 62716
Telephone (217) 782-1617
<http://www.sos.state.il.us>

Jesse White

Secretary of State
FILED 05/28/2003

SUBMIT IN DUPLICATE

This space for use by
Secretary of State

Date 05/28/2003

Filing Fee \$ 5

Approved: MJ

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

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE



CP08U0F44

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

- CORPORATE NAME: NORTH SUBURBAN DENTAL HYGIENISTS SOCIETY, INC
- STATE OR COUNTRY OF INCORPORATION: ILLINOIS
- 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 EDMUND M TOBIN
First Name Middle Name Last Name
Registered Office THREE FIRST NATIONAL PLAZA #1950
Number Street Suite No. (A P.O. Box alone is not acceptable)
CHICAGO 60602 COOK
City ZIP Code County
- Name and address of the registered agent and registered office shall be (after all changes herein reported):
Registered Agent LAURA M. BURKE
First Name Middle Name Last Name
Registered Office 2607 DEERFIELD LANE
Number Street Suite No. (A P.O. Box alone is not acceptable)
ROLLING MEADOWS IL 60008 COOK
City ZIP Code County

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- 5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
- 6. The above change was authorized by: ("X" one box only)
 - a. By resolution duly adopted by the board of directors. (Note 5)
 - b. By action of the registered agent. (Note 6)

NOTE: When the registered agent changes, the signatures of both president and secretary are required.
 7. (If authorized by the board of directors, sign here. See Note 5)
 The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true.

Dated MAY 15, 2003 NORTH SUBURBAN DENTAL HYGIENISTS SOCIETY INC
(Month & Day) (Year) (Exact Name of Corporation)
 attested by Kym Dallstream RDH BSDH by Joyce Aguinardo RDH BSDH
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)
Kym Dallstream RDH BSDH Joyce Aguinardo RDH BSDH - PRESIDENT
(Type or Print Name and Title) Secretary (Type or Print Name and Title)

(If change of registered office by registered agent, sign here. See Note 6)
 The undersigned, under penalties of perjury, affirms that the facts stated herein are true.

Dated _____, _____
(Month & Day) (Year)

(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 number 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).
6. The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent.