

# UNOFFICIAL COPY



Form LP 202  
(Rev. July 2003)

Filing Fee \$50

SUBMIT IN DUPLICATE!

Doc#: 0403629093  
Eugene "Gene" Moore Fee: \$26.00  
Cook County Recorder of Deeds  
Date: 02/05/2004 10:25 AM Pg: 1 of 2

LP#311/20/03:01:8143: 150.00 MW  
505IL 5007578 FILED 202

Return to: Department of  
Business Services  
Limited Partnership Section  
Room 357, Howlett Building  
Springfield, IL 62756  
Telephone: (217) 785-8960  
<http://www.ilsos.net>

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.

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)

1. Limited partnership's name: Angell Family Partners, L.P.
2. File number assigned by the Secretary of State: 5007578
3. Federal Employer Identification Number (F.E.I.N.): 36-3900287
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 is 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 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).

5-  
P-  
JTD

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LPR311/20/03+01+8143+ 150.00 MU  
SOSIL 5007578 FILED 202

5. Place Item #4 changes here:

4 a) Admission of new General Partners:

Richard A. Angell	Nancy H. Babendir
5225 West Old Orchard Road	5225 West Old Orchard Road
Suite 23A	Suite 23A
Skokie, Illinois 60077	Skokie, Illinois 60077

4 d) New Address of Records Office:

5225 West Old Orchard Road  
Suite 23A  
Chicago, Illinois 60077  
Cook County

4 b) Withdrawal of the following General Partner:  
Harvey Angell (Deceased)

4 f) Change in Partners' Total Aggregate Contribution:  
Amount:  
\$104,784.00

4 c) New Registered Agent:

Richard A. Angell  
5225 West Old Orchard Road  
Suite 23A  
Skokie, Illinois 60077

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.

1. Signature *Richard A. Angell*  
 Type or print name and title Richard A. Angell, as ind. co-executor of the Estate of Harvey Angell  
 Name of General Partner if a corporation or other entity \_\_\_\_\_  
 (must be in good standing)

**BUSINESS ADDRESS**  
 Number/Street 5225 West Old Orchard Road, Suite 23A  
 City/town Skokie  
 State Illinois ZIP Code 60077

2. Signature *Richard A. Angell*  
 Type or print name and title Richard A. Angell, a General Partner  
 Name of General Partner if a corporation or other entity \_\_\_\_\_  
 (must be in good standing)

Number/Street 5225 West Old Orchard Road, Suite 23A  
 City/town Skokie  
 State Illinois ZIP Code 60077

3. Signature *Nancy H. Babendir*  
 Type or print name and title Nancy H. Babendir, a General Partner  
 Name of General Partner if a corporation or other entity \_\_\_\_\_

Number/Street 5225 West Old Orchard Road, Suite 23A  
 City/town Skokie  
 State Illinois ZIP Code 60077

(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!**