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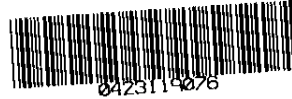
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LPR307/28/04:01:59:33:
3051L 0008130 FILED 2004

Form LP 202
(Rev. July 2003)

Filing Fee \$50

SUBMIT IN DUPLICATE!



Doc#: **0423119076**
Eugene "Gene" Moore Fee: \$26.50
Cook County Recorder of Deeds
Date: 08/18/2004 10:39 AM Pg: 1 of 2

Return to: Department of
Business Services
Limited Partnership Section
Room 357, Howlett Building
Springfield, IL 62756
Telephone: (217) 785-8960
<http://www.wilsos.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: Lancelot Chateau Development, an Illinois Limited Partnership
2. File number assigned by the Secretary of State: C008130
3. Federal Employer Identification Number (F.E.I.N.): 36-3859591
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).



AFTER RECORDING RETURN TO:
CORPORATE COMPLIANCE DEPT.
GOULD & RATNER
222 NORTH LASALLE STREET
SUITE 800
CHICAGO, ILLINOIS 60601-1086

CLP-9.9

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LPR307/28/04+01+8833+ 150.00 CK02
S051L 0008130 FILED 202

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5. Place Item #4 changes here:

Article 6 of the Certificate of Limited Partnership is amended in its entirety to read as follows:

(a) acquire, own, construct, operate, manage, lease and improve real property and improvements located at 3200 Sanders Road, Northbrook, Illinois; and

(b) acquire, own, manage, pledge, sell and otherwise deal with membership interests in: (1) W/G LCD LLC, a Delaware limited liability company, (2) R/W LCD LLC, an Illinois limited liability company, and (3) M/S LCD LLC, an Illinois limited liability company.

Article 7 of the Certificate of Limited Partnership is amended to read as follows:

Dissolution date is: December 31, 2035

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>Michael R. Sparks</i></u>	Number/Street <u>700 Perrie Drive, Suite 115</u>
Type or print name and title <u>Michael R. Sparks,</u>	City/Town <u>Elk Grove Village</u>
<u>President</u>	
Name of General Partner if a corporation or other entity <u>Lancelot Northbrook, Inc.</u>	State <u>Illinois</u> ZIP Code <u>60007</u>
<u>(must be in good standing)</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 _____
<u>(must be in good standing)</u>	
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!