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0507339065

Form **BCA-5.10**  
**NFP-105.10**

STATEMENT OF CHANGE  
OF REGISTERED AGENT  
AND/OR REGISTERED OFFICE

Doc#: 0507339065  
Eugene "Gene" Moore Fee: \$26.00  
Cook County Recorder of Deeds  
Date: 03/14/2005 02:13 PM Pg: 1 of 1

(Rev. Jan. 1991)

George H. Ryan  
Secretary of State  
Department of Business Services  
Springfield, IL 62756  
Telephone (217) 782-3647

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

**FILED**

**DEC 28 2004**

JESSE WHITE  
SECRETARY OF STATE

This space for use by  
Secretary of State

Date

Filing Fee \$ 5

Approved: *Bh*

1. CORPORATE NAME: Medical Practice Managers of Illinois, Inc.

2. STATE OR COUNTRY OF INCORPORATION: Illinois

3. 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	<u>Michael</u>	<u>J.</u>	<u>Hriljac</u>
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
Registered Office	<u>6437 Cherokee Drive</u>		
	<small>Number</small>	<small>Street</small>	<small>Suite No. (A P.O. Box alone is not acceptable)</small>
	<u>Indian Head Park</u>	<u>60525</u>	<u>Cook</u>
	<small>City</small>	<small>Zip Code</small>	<small>County</small>

4. Name and address of the registered agent and registered office shall be (*after all changes herein reported*):

Registered Agent	<u>Michael J. Hriljac</u>	<u>at Robbins, Salomon &amp; Patt, Ltd.</u>	
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
Registered Office	<u>25 East Washington Street</u>	<u>Suite 1000</u>	
	<small>Number</small>	<small>Street</small>	<small>Suite No. (A P.O. Box alone is not acceptable)</small>
	<u>Chicago</u>	<u>60601</u>	<u>Cook</u>
	<small>City</small>	<small>Zip Code</small>	<small>County</small>

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 \_\_\_\_\_ 19, \_\_\_\_\_

(Exact Name of Corporation)

attested by \_\_\_\_\_ by \_\_\_\_\_

(Signature of Secretary or Assistant Secretary)

(Signature of President or Vice President)

(Type or Print Name and Title)

(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 12-17-04 19, \_\_\_\_\_

(Signature of Registered Agent of Record)

*304*  
*3/12*