## **UNOFFICIAL COPY**

FORM **BCA 5.10/5.20** (rev. Dec. 2003)

STATEMENT OF CHANGE OF **REGISTERED AGENT AND/OR REGISTERED OFFICE** 

**Business Corporation Act** 

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647 www.cyberdriveillinois.com

Remit payment in the form of a check or money order payable to the Secretary of State.

FILED

MAY 2 3 2005

JESSE WHITE SECRETARY OF STATE



Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 06/23/2005 11:16 AM Pg: 1 of 2

		File # <u>585</u>	9-8/2-7	Filing Fee: \$25.00 A	Approved: (2
	Submit in duplica	te ——Type or Print cle	arly in black ink-	—Do not write above this line—	111111111111111111111111111111111111111
1.	CORPORATE NAME: U	M3 INN, INC.			
2.	STATE OR COUNTRY	OF INCORPORATION:	MARYLAND		
3.	Name and address of the of the Secretary of State	ne registered eyert and re e (before change)	egistered office as the	ey appear on the record	s of the office
	Registered Ager	t GREGORY C. VAR			
	Registered Offic	First Name e 444 N. MICHIGAN A	⁻ <i>Middle Name</i> VEN JE, SUITE 250	Last Na	ame
	J	Number Street CHICAGO, ILLINOIS	Suite No. (A F	P.O. Box alone is not acce	ptable)
		City	ZIP Code	Coun	nty
4.		e registered agent and re		oe (after all changes her	rein reported):
	Registered Ager	t GREGORY C. WARD	) (		
	Registered Offic	First Name e 111 E. WACKER DR	Middle Name IVE, SUITE 2800	Last Na	ame
		Number Street CHICAGO, ILLINOIS	Suite No. (A F 60601, COOK CC	P.O. <i>Eo calone is not acce</i> DUNTY	ptable)
		City	ZIP Code	Coun	oty Olle
5.	The address of the regist will be identical.	tered office and the addres	ss of the business offic	ce of the registered agen	t, as changed,
6.	The above change was	authorized by: ("X" one b	oox only)		

## SEE REVERSE SIDE FOR SIGNATURES(S).

By resolution duly adopted by the board of directors.

By action of the registered agent.

**RETURN TO:** 

(Note 5)

(Note 6)

Amy J. Inlander, Paralegal Shefsky & Froelich, Ltd. 111 E Wacker Dr, Suite 2800 Chicago IL 60601

C-135.17

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(If authorized by the board of directors, sign here. See Note 5) 7.

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true.

Dated			MB INN, INC.
	(Month & Day)	(Year)	(Exact Name of Corporation)
	(Any Authorized Officer'	s Signature)	
	(Type or Print Name a	and Title)	
(If change o	f registered office by registed dersigned, under penalties	ered agent, si of perjury, aff	gn here. See Note 6) irms that the facts stated herein are true.
Dated	$\triangle$		selled
	(Month & Day)	(Year)	(Signature of Registered Agent of Record)
			GREGORY C. WARD
	9	)5	(Type or print name. If the registered agent is a corporation, type or print the name and title of the officer who is signing on its behalf.)
	,	$C_{\alpha}$	

## NOTES

- 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.
- The registered office must include a street or road addres; a post office box number alone is not acceptable. 2.
- 3. A corporation cannot act as its own registered agent.
- If the registered office is changed from one county to another, then the corporation must file with the recorder 4. 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.
- Any change of registered agent must be by resolution adopted by the board of directors. This statement must 5. then be signed by a duly authorized officer.
- 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. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.