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Form LLC-1.36/

Secretary of State Jesse White Department of Business Services Limited Liability Division Room 351 Howlett Building 501 S. Second St. Springfield, IL 62756 www.cyberdriveillinois.com

Payment must be made by business firm check payable to Secretary of State. (If check is returned for any reason this filing will be void.)

Illinois **Limited Liability Company Act**

Statement of Change of Registered Agent and/or Registered Office

SUBMIT IN DUPLICATE

Must be typewritten

This space for use by Secretary of State.

Filing Fee: \$25 Approved:

FILE# 01321102

This space for use by Secretary of State.

FILED

OCT 1 2 2006

JESSE WHITE SECRETARY OF STATE

	\sim		
1	Limited Liability Company Name: ATLAS HEALTH A	ADMINISTRATORS, I	LC
1.	100		
2.	Name and Address of Registered Agent and Registered (Office as they appear on th	e records of the Office of the Secretary
	of State (before change):		DEBRINGTON
	Registered Agent HOWARD	M. Middle Name	BERRINGTON Last Name
	First Name	Middle Name	
	10% FE MONROF ST	40TH FL.	
	Registered Office 55 E. MONROE ST	Suite No. (P.O	. Box alone is unacceptable)
	4	60603	COOK
	CHICAGO, IL	ZIP Code	County
	City		
3.	Name and Address of Registered Agent and Registere	d Office shall be (after all	changes herein reported):
٥.		/ / . ~	BERRINGTON
	Registered Agent HOWARD	M. Mid do Name	Last Name
	First Name		
	Registered Office 2 N. LASALLE ST. Number Street	SUITE 130	00
		Suite No 19.0). Box alone is unacceptable)
	01110400 11	60602	COOK
	CHICAGO, IL City	ZIP Code	County
			with red agent as changed will be
4.	The address of the registered office and the address of	of the business office of the	ne registered agent, as changed, will be
-1.	identical.		111100 AAAA 11118 Suu Pisat 11111 11100 AAAA 11111 11110 AAAAA 1111
		(only)	
5.	The above change was authorized by: (check one box a. The resolution duly adopted by the members or man	aners. (See Note 4.)	
	a. U resolution duly adopted by the members of than	macion (page 11212 11)	Doc#: 0630331023 Fee: \$26.0
	b. action of the registered agent. (See Note 5.)	Eugene "Gene" Moore	

SEE REVERSE FOR SIGNATURE(S).

Cook County Recorder of Deeds Date: 10/30/2006 10:54 AM Pg: 1 of 2

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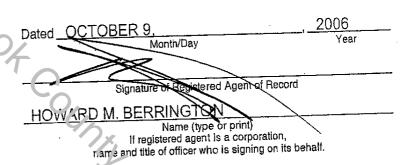
6. If the change to the registered agent or registered office is authorized by the members or managers, sign here. (See Note 4 below.)

The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this statement to change the registered agent or address is to the best of my knowledge and belief, true, correct and complete.

Dated	Month/Day	Year
	Signature (Must comply with Section 5-45	of ILLCA.)
	Name and Title (type or print)	
	If the member or manager signing this documen other entity, state name of company and indica member or manager of the Limited Liabilit	(fe Mileniei ir ia d

If change of registered office by registered agent, sign here. (See Note 5 below.)

The undersigned, under penalties of perjury, affirms that the facts stated herein are true, correct and complete.



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NOTES

- 1. The registered office may, but need not be, the same as the principal office of the Limited Liah: ity Company; 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 address (P.O. Box alone is unacceptable).
- 3. A Limited Liability Company cannot act as its own registered agent.
- Any change of registered agent or registered address effected by the Limited Liability Company must be by resolution adopted by the members or managers.
- 5. The registered agent may report a change of the registered office of the Limited Liability Company for which he/she is a 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.