Form LLC-1.36/

July 2005

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.)

**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: 18 FILE# 01740164

This space for use by Secretary of State.

FILED

OCT 1 2 2006

JESSE WHITE SECRETARY OF STATE

this fil	ing will be void.)	Appleton				
سبسمه			N INSURANCE GROUP	, LLC		
1.	Limited Liability Company Na	ime: THE STATEMA	N INSURANCE GROUP			
2.	Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):					
		DD 0%	M	BERRINGTON		
	Registered Agent HOWA	First Name	Middle Name	Last Name		
	Registered Office 55 E.	MONROE ST.	40TH FL. Suite No. (P.O.	Box alone is unacceptable)		
			60603	COOK		
	<u>CHIC</u>	AGO, IL City	ZIP Code	County		
n	Name and Address of Registered Agent and Registered Onice shall be (after all changes herein reported):					
3.			M	BERRINGTON		
	Registered Agent HOWA	ARD First Name	Midr. la Name	Last Name		
	Registered Office 2 N. L	ASALLE ST.	SUITE 130 Suite No. (P.O.	OO . Box alone is unacceptable)		
			60602	COOK		
	<b></b>	AGO, IL	ZIP Code	County		
		ony	ss of the business office of the	e regis ered agent, as changed, will be		
4.	identical.	ed office and the address of the business office of the regis ered agent, as changed, will be				
5.	The above change was authorized by: (check one box only) a. $\square$ resolution duly adopted by the members or managers. (See Note 4.) b. $\bowtie$ action of the registered agent. (See Note 5.)			2630331 027		
	b. X action of the registered agents (			Doc#: 0630331027 Fee: \$26.00 Eugene "Gene" Moore Cook County Recorder of Deeds Date: 10/30/2006 10:55 AM Pg: 1 of 2		

SEE REVERSE FOR SIGNATURE(S).

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## **UNOFFICIAL COPY**

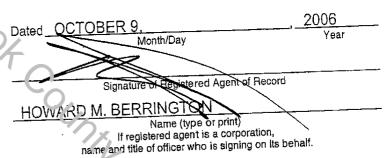
If the change to the registered agent or registered office is authorized by the members or managers, sign here.
(See Note 4 below.)

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 IL	LCA.)
	Name and Title (type or print)	
	If the member or manager signing this document is a other entity, state name of company and indicate wh member or manager of the Limited Liability Co	TENTO IL 10 P

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 Lizarity Company; however, the registered office and the office address of the registered agent must be the same.
- 2. 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.