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FORM **BCA 5.10/5.20** (rev. Dec. 2003)
STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE
Business Corporation Act

Doc#: **0630331036** Fee: \$26.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 10/30/2006 10:59 AM Pg: 1 of 2

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

FILED

OCT 19 2006

JESSE WHITE
SECRETARY OF STATE

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

File # 61069771 Filing Fee: \$25.00 Approved: Ph

Submit in duplicate Type or Print clearly in black ink Do not write above this line

1. CORPORATE NAME: HEALTH E CONNEX, 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	HOWARD	M.	BERRINGTON
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Registered Office	55 E. MONROE ST.	40TH FL.	
	<i>Number</i>	<i>Street</i>	<i>Suite No. (A P.O. Box alone is not acceptable)</i>
	CHICAGO, IL	60603	COOK
	<i>City</i>	<i>ZIP Code</i>	<i>County</i>

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

Registered Agent	HOWARD	M.	BERRINGTON
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Registered Office	2 N. LASALLE ST.	SUITE 1300	
	<i>Number</i>	<i>Street</i>	<i>Suite No. (A P.O. Box alone is not acceptable)</i>
	CHICAGO, IL	60602	COOK
	<i>City</i>	<i>ZIP Code</i>	<i>County</i>

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)

SEE REVERSE SIDE FOR SIGNATURES(S).

RETURN TO BOX 242

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