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Form **LLC-1.36/**
1.37 July 2005

Illinois Limited Liability Company Act Statement of Change of Registered Agent and/or Registered Office

FILE # 01428705
This space for use by Secretary of State.

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

SUBMIT IN DUPLICATE
Must be typewritten

This space for use by Secretary of State.

FILED

OCT 16 2006

JESSE WHITE
SECRETARY OF STATE

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.)

Filing Fee: \$25

Approved: 

1. Limited Liability Company Name: AMB-AMS LOCAL GOLF LANE, LLC
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).

Registered Agent ILLINOIS CORPORATION SERVICE COMPANY

First Name Middle Name Last Name

Registered Office 801 ADLAI STEVENSON DRIVE

Number Street Suite No. (P.O. Box alone is unacceptable)

SPRINGFIELD 62703 COUNTY OF SANGAMON
City ZIP Code County

3. Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):

Registered Agent NATIONAL REGISTERED AGENTS, INC.

First Name Middle Name Last Name

Registered Office 200 WEST ADAMS STREET

Number Street Suite No. (P.O. Box alone is unacceptable)

CHICAGO 60606 COUNTY OF COOK
City ZIP Code County

4. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
5. The above change was authorized by: (check one box only)
- a. resolution duly adopted by the members or managers. (See Note 4.)
- b. action of the registered agent. (See Note 5.)



0636006022

Doc#: 0636006022 Fee: \$26.50
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 12/26/2006 09:05 AM Pg: 1 of 2

SEE REVERSE FOR SIGNATURE(S).

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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 SEPTEMBER 14, 2006
Month/Day Year



Signature (Must comply with Section 5-45 of ILLCA.)

JUDY CULVER, ATTORNEY-IN-FACT FOR

Name and Title (type or print)

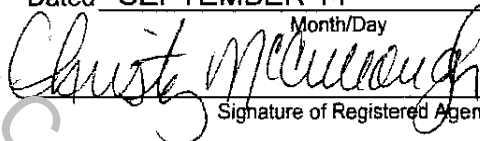
AMB-AMS LOCAL, L.P., MEMBER

If the member or manager signing this document is a company or other entity, state name of company and indicate whether it is a member or manager of the Limited Liability Company.

- 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.

Dated SEPTEMBER 14, 2006
Month/Day Year



Signature of Registered Agent of Record

CHRISTY MCCULLOUGH, ASST. SECRETARY

Name (type or print)

If registered agent is a corporation,
name and title of officer who is signing on its behalf.

NOTES

1. The registered office may, but need not be, the same as the principal office of the Limited Liability 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.
4. 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.