_C-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:

FILE#

MAR 1 2 2007

JESSE WHITE SECRETARY OF STATE

1	Limited Liability Com	nnany Name: 1359	c k:	ldare. LLC		
۱.	(C					
2.	Name and Address of State (before char		∍gistered	d Office as they appear o	n the records of the Office of the Sec	retary
	Registered Agent _	Kevin Mudd First Name		Middle Name	Last Name	
	Registered Office _	1005 W Webst	er /	tve.		
	J	Number Street)	Suite No. (P.O. Box alone is unacceptable)		
		Chicago	0/	60614	Cook	
	<u></u>	City	7	ZIP Code	County	
3.	Name and Address	of Registered Agent and	Registe	ed Office shall be (after	all changes herein reported):	ein reported):
	Registered Agent	Michael		Р.	Cohen	
		First Name		M ddle Name	Last Name	
	Registered Office _	435	W.	Erie 802		
	•	Number Street			P.O. Box alone is unacceptable)	
		Chicago		60610	Cook	

The address of the registered office and the address of the business office of the registered agent, as changed, will be 4. identical.

ZIP Code

- The above change was authorized by: (check one box only) 5.
 - a. 💆 resolution duly adopted by the members or managers. (See Note 4.)

City

b. action of the registered agent. (See Note 5.)

Cook

County

Doc#: 0707834095 Fee: \$26.00

Eugene "Gene" Moore

Cook County Recorder of Deeds

Date: 03/19/2007 01:04 PM Pg: 1 of 2

SEE REVERSE FOR SIGNATURE(S).

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6. If the change to the registered agent 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 Fel	bruary 23,	2007					
Mu	Month/Day	Year ULL					
Sig	Signature (Must comply with Section 5-45 of ILLCA.)						
Ŋ	Mitch Squire,	Member					
	Name and Title (type	e or print)					
other en	mber or manager signing this tity, state name of company a mber or manager of the Limit	and indicate whether it is a					

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		,				
	Month/Day	Year				
- O-						
0/4	Signature of Registered Agent of Record					
C	Name (type or print) If registered agent is a corporation.					
	name and title of officer who is signing on	n its behalf.				
	C					
NOTES	C/Z					

NOTES

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

Printed by authority of the State of Illinois. February 2006 - 5M - LLC-36