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SOSIL FILE NO. 0006750 FILED BY:

Form LP 202 January 2005

Filing Fee: \$50

Submit in duplicate. Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to Secretary of State.

Please do not send cash.

Department of Business Services Limited Partnership Division 357 Howlett Building Springfield, IL 62756 217-785-8960 www.cyberdriveillinois.com

Consequedence regarding this filing will be sent to the registered agent of the Limited Partnership unless a selfaddressed, stumped envelope is included.



Doc#: 0714457208 Fee: \$26.50 Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 05/24/2007 12:03 PM Pg: 1 of 2

Illinois Secretary of State Department of Business Services

Certificate of Amendment to the Certificate of Limited Partnership (Illinois Limited Partnership or LLLP)

Please type or print clearly.

- 1. Limited Partnership Name: CEF 1991 Limited Partnership 2. File Number assigned by Secretary of State: C006750 3. Federal Employer Identification Number (F.E.I.N.): 36-381767/ 4. The Certificate of Limited Partnership is amended as follows: (Check applicable changes and specify in item 5. For address changes, P.O. Box alone is unacceptable.) a) Admission of a new General Partner (give name and business audress in item 5) □ b) Withdrawal of a General Partner (give name in item 5) 🗹 c) Change of Registered Agent and/or Registered Agent's office (give new name and address, including county in item 5) d) Change in address of office at which the records required by Section 104 or 112 of the Act are kept (give new address in item 5) e) Change in General Partner's name and/or business address (give new name and address in item 5) (give new dollar amount in item 5) ag) Change in Limited Partnership's name (give new name in item 5) ☐ h) Change in Date of Dissolution (give new date in item 5) ☐ i) Other (give information in item 5) Dissociation of General Partner (only for Limited Partnerships registered in 2005 and later; give name in item 5)
- 5. Item #4 changes (For additional space, continue on next page.):
 - c) Peter C. Quigley c/o Community Reinvestment Fund 850 W. Jackson Blvd., Suite 825 Chicago IL 60607 Cook County

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- 5. Item #4 changes (cont.)
- d) c/o Peter C. Quigley

Community Reinvestment Fund

850 W. Jackson Blvd., Suite 825 Chicago IL 60607 Cook County

Names and Business Addresses of General Partners

The undersigner affirms, under penalties of perjury, that the facts stated herein are true. The following signatures are required:

- at least one General Partner on record,
- all new General Partners,
- all Dissociated and with drawing General Partners.

If o	adding or/deleting a statem of that this Limited Partn	ers	ship is a Limited Liability Limited Partnership, all
	eneral Portreys on record must light		,
1.	11161;	2	
	Peter C. Quigley, Secretary of General Partnur		Signature
	Name and Title (type or print) Chicago Equity Fund, Inc.)	Name and Title (type or print)
	General Partner Name if corporation or other entity (must be in good standing)	0	General Partner Name if corporation or other entity (must be in good standing
	Street Address		Street Address
3.	City, State, ZIP		City, State, ZIP
J.	Signature	4.	Signature
	Name and Title (type or print)		Name and fitle (iyp.) or print)
	General Partner Name if corporation or other entity (must be in good standing)		General Partner Name if corporation or oiner entity (must be in good standing)
	Street Address		Street Address
	City, State, ZIP		City, State, ZIP

Signatures must be in black ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.