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#### 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

Correspondence regarding this filing will be zero the registered agent of the Limited Concership unless a self-addressed stronged envelope is included.



Doc#: 0734034095 Fee: \$26.00

Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 12/06/2007 11:31 AM 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.

providedity.
1. Limited Partnership Name: TB LIMITED PARTN'-PSHIP
2. File Number assigned by Secretary of State: S007437
3. Federal Employer Identification Number (F.E.I.N.): 36-3840000
<ul> <li>4. The Certificate of Limited Partnership is amended as follows: (Check applicable changes and specify in item 5. For address changes, PO. Box alone is unacceptable.)  a) Admission of a new General Partner (give name and business address 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 (11 of the Act are kept (give new address in item 5)  c) Change in General Partner's name and/or business address (give new name and address in item 5)  d) Change in Partner's total aggregate contribution amount (give new dollar amount in item 5)  d) Change in Date of Dissolution (give new name in item 5)  i) Other (give information in item 5)  i) Dissociation of General Partner (only for Limited Partnerships registered in 2005 and later; give name in item 5)</li> </ul>
5. Item #4 changes (For additional space, continue on next page.):
JOHN E. SHAFFER

0734034095 Page: 2 of 2

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### Form LP 202

5. Item #4 changes (cont.)	
$I = I \cap D$	
980 N. Michigan	Avenue, Suite 1280
Chicago, IL 600	Avenue, Suite 1280 Oll (E2) and E. Thomas Collins, JR suite # 5/8/280
Names and Business Addresses of General	Partners
The undersigned affirms, under penalties of perjury signatures are required:  at least one General Partner on record,  all new General Partners,  all Dissociated and withdrawing General Partner	, that the facts stated herein are true. The following
If adding or deleting a storen ent that this Limited Pa General Partners on record must sign.  1. Signature  E. THOMAS COLLINS, JR., GENERAL PARTNER  Name and Title (type or print)	rtnership is a Limited Liability Limited Partnership, all  Signature  RICHARD HULINA, GENERAL PARTNER  Name and Title (type or print)
General Pariner Name if corporation or other entity (must be in good stunding 980 N. MICHIGAN AVENUE, SUITE 1280  Street Address  CHICAGO, IL 60611  City, State, ZIP  Signature  JOHN E. SHAPFER, WITHDRAWING GENERAL	General Partner Name if corporation or other entity (must be in good standing) 980 N. MICHIGAN AVENUE, SUITE 1280 Street Address CLICAGO, IL 60611 City, State, ZIP
PARTNER  General Partner Name if corporation or other entity (must be in good standing) 233 S. WACKER DRIVE, SUITE 350  Street Address  CHICAGO, IL 60606	Signature  Name and Title (type or print)  General Partner Name if corporation or othe entity (must be in good standing)  Street Address
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.

Printed by authority of the State of Illinois. Janu	DATE 12/3/01 FEE \$150.00 PORT 12/3/01 FEE \$150.00 PORT 2006 - 1M - CLP 9.14  NO 500 7487
	Soo 7487
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