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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.)

Illinois **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# 0043

This space for use by Secretary of State.

MAR 2 5 2008

JESSE WHITE SECRETARY OF STATE

Limited Liability Cornoany Name: DM, L.L.C. 1. 2. Name and Address of Registured Agent and Registered Office as they appear on the records of the Office of the Secretary

of State (before change):

Registered Agent PETER **ECONOMOS** First Nam. Middle Name Last Name Registered Office 6 WEST HUBBARD STREET SUITE 800 Suite No. (P.O. Box alone is unacceptable) Number Street CHICAGO 60610 COOK Citv ZIP Code County

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

C Registered Agent PETER **ECONOMOS** First Name Middle Name Last Name Registered Office _333 WEST WACKER STREET **SUITE 1700** Number Street Suite No + O. Box alone is unacceptable) **CHICAGO** 60606 COOK City ZIP Code County

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

Doc#: 0812326048 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 05/02/2008 10:16 AM Pg: 1 of 2

SEE REVERSE FOR SIGNATURE(S).

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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.

Pated	Month/Day	Yea
Si	gnature (Must comply with Section 5-	45 of ILLCA.)
	Name and Title (type or prin	t)
If the me	ember or manager signing this docume	ent 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 periory, affirms that the facts stated herein are true, correct and complete.

Dated FEBRUARY 28, 2008 2008 Month/Day Year Signature of Registered Agent of Record PETER C. ECONOMOS

Name (type or print)

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

NOTES

- 2/0/4/5 The registered office may, but need not be, the same as the principal office of the Limited Liabi' tv 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.
- 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.