## **UNOFFICIAL COPY**-

FORM BCA 5.10/5.20 (rev. Dec. 2003) STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE Business Corporation Act

Jesse White, Secretary of State Department of Business Services 501 S. Second St., Rm. 350 Seringfield II. 62758

Springfield, IL 62756 SECRETARY OF STATE JESSE WHITE FILED 04/28/08

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Remit payment in the form of a check or money order payable to Secretary of State.

	Submit in de	File #File or		Filing Fee: \$25 Approved: SG  Do not write above this line
	Corporate Name:	Ox TR	AIPLE T NAILS, INC.	CP0160482
	State or Country of In	corporation:		
	Name and Address of Secretary of State (be	ofore change):	$\tau_{0}$	pear on the records of the Office of the
	Registered Agent:	BRUCE First Name		
	Decistered Office.	134 North LaS	alle #1218	Last Name
	Registered Office;	Number Chicago	60602 Sire at	Suite # (P.O. Box alone is unacceptable) Cook
		City	ZIP Code	County
	Name and Address of	Registered Agent and R	legistered Office shall be (af	ter all changes herein reported):
	Registered Agent:	DONALD	м.	LEIBSKER
	F	First Name 29 South LaSall	Middle Name	Last Name
	Registered Office:	Number	le #415 Street	Suite # (P.O. Pox sione is unacceptable)
		Chicago	60603	Cook
		City	ZIP Code	County
	be identical.  The above change was  a. A Resolution duly	s authorized by: ("X" one y adopted by the board o	box only) of directors. (See Note 5 on	of the registered agent, as changed, will reverse.
ı	b. 🗓 Action of the re	egistered agent. (See No	ote 6 on reverse.)	Doc#: 0813522002 Fee: S Eugene "Gene" Moore

SEE REVERSE FOR SIGNATURE(S).

Cook County Recorder of Deeds Date: 05/14/2008 09:40 AM Pg: 1 of 2

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Dated <u> </u>	. 2008	TRIPLE T NAILS, INC.
Month & Day	Year	Exact Name of Corporation
Any Authorized Office	's Signature	
KIEU GAING LE DO,	President	
Name and Title (type change of registered office by	e or print) registered agent, sign	here. (See Note 6 below.) The facts stated herein are true and correct.
Name and Title (typ change of registered office by ne undersigned, under penalties ated	e or print)  registered agent, sign of perjury, affirms that t	ne facts stated herein are true and correct.
Name and Title (type change of registered office by the undersigned, under penalties	e or print) registered agent, sign	s here. (See Note 6 below.) ne facts stated herein are true and correct.  Signature of Registered Agent of Record
Name and Title (type change of registered office by the undersigned, under penalties stated	e or print)  registered agent, sign of perjury, affirms that t	ne facts stated herein are true and correct.

## **NOTES**

- The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered open must be the same.
- 2. The registered office must include a street or roat address (P.O. Box alone is unacceptable).
- 3. A corporation cannot act as its own registered agent
- 4. If the registered office is changed from one county to anomar, the corporation must file with the Recorder of Deeds of the new county a certified copy of the Articles of Incorporation and a certified copy of the Statement of Change of Registered Office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of registered agent must be by resolution adopted by the box a of directors. This statement must be signed by a duly authorized officer.
- 6. The registered agent may report a change of the registered office of the corporation 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.