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. 328 Springfield, IL 62756 217-782-7808 www.cyberdriveillinois.com

, - . \

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



Doc#: 1007018121 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds

Date: 03/11/2010 04:23 PM Pg: 1 of 2

=	L	D

JUN 24 2009

JESSE WHITE SECRETARY OF STATE

	√ ,				ı	
	<u></u>	Fi	le # <i>54</i>	,93-334-4	Filing Fee: \$25	Approved:
	——— Submit In d	lupilonte ——— Tyl	oe or Print cle	early in black ink	- Do not write ab	ove this line — V
1.	Corporate Name: _	HERITAGÉ NURSIN		C.		
2.	State or Country of	Incorporation: ILL_in	iois -			CP0880932
3.	Name and Address Secretary of State (I Registered Agent; A	oefore change): NBRA <u>HAM</u> J. STER f	4	tered Office as they ap	pear on the rec	ords of the Office of the
	• • •	First Name	.:	Middle Name		Last Name
	Registered Office: 1	0 S. WACKER DR.,	40TH FLOO	R 4/A		
	·	Number		Struet	Suite # (P.O.	Box alone is unacceptable)
	C	CHICAGO		60606	соок	
		City		ZIP Code		County
4.				red Office shall be (afte	ं।' changes her	ein reported):
	Registered Agent: N		GENT SERV		9,1	
		First Name		Middle Name		Last Name
	Registered Office: 1	91 N. WACKER DR	., STE. 1800		U)Ç	
		Number		Street	Suite # (と.C.	Box alone is unacceptable)
	· _c	HICAGO		60606	C	con di
	-	City	<i>(</i>	ZIP Code		County 0
5.	The address of the reidentical.	egistered office and	the address o	of the business office of	the registered a	germas changed, will be
6.	The above change w					JUN 2 4 2009
	a. ☑ Resolution dub. ☐ Action of the	ily adopted by the b registered agent. (S	oard of direct ee Note 6 or	tors. (See Note 5 on re n reverse.)	verse.)	DEPARTMENT OF

SEE REVERSE FOR SIGNATURE(S).



BUSINESS SERVIC

1007018121 Page: 2 of 2

UNOFFICIAL COPY

7. If authorized by the board of directors, sign here. (See Note 5 below.)

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated JUNE 11	, <u>09 </u>	HERITAGE NURSING HOME, INC.
Any Authorized Officer's Signature	Year	Exact Name of Corporation
Daniel Shabat, President		
Name and Title (type or print)		
If change of registered office by registered The undersigned, under penalties of perjury, a		
Dated	•	•
Dated Month & Day	Year	Signature of Registered Agent of Record
	Year	Signature of Registered Agent of Record Name (type or print) If Registered Agent is a corporation, Name and Title of officer who is signing on its behalf.

NOTES

- 1. 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 agent must be the same.
- 2. The registered office must include a street or road 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 another, 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 board 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.