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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

217-782-7808 www.cyberdriveillinois.com

identical.

6. The above change was authorized by: ("X" one box only)

b. Action of the registered agent. (See Note 6 on reverse.)

a. A Resolution duly adopted by the board of directors. (See Note 5 on reverse.)

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

FILED

SEP - 1 2010

JESSE WHITE SECRETARY OF STATE (638-373)

Doc#: 1030522042 Fee: \$40.25

Cook County Recorder of Deeds
Date: 11/01/2010 11:08 AM Pg: 1 of 2

					,	
		File #_ D 4683	-483-6	_ Filing Fee: \$25	Approved:	
	———— Submit in duplicate	— Type or Print clea	arly in black ink	— Do not write abo	ve this line —	
1.	Corporate Name: SCHIPPOPEII	, INC				
2.	State or Country of Incorporation:	COOK				
3.	Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):					
	Registered Agent: <u>STANFORD Le</u> First Nam		Middle Name		Last Name	
	Registered Office: <u>55 E. MONROR</u> Number		Stree/.	Suite # (P.O.	Box alone is unacceptable)	
	<u>.CHICAGO IL. 6</u> City	0603-5803	ZIP Code		COOK County	
4.	Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):					
	Registered Agent: ALICE SCHIPF First Nam	POREIT ne	Middle Name	30	Last Name	
	Registered Office: 929 E. GLENW Numbe	OOD ROAD	Street	Suite # (P.J.	Sox alone is unacceptable)	
	GLENVIEW, IL City	60025	ZIP Code		COCK	

SEE REVERSE FOR SIGNATURE(S).

5. The address of the registered office and the address of the business office of the registered agent, as changed, will be



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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	JULY 19		SCHIPPOREIT, INC					
	Month & Day	Year	Exact Name of Corporation					
Any Authorized Officer's Signature								
GEORGE D. SCHIPPOREIT, PRESIDENT Name and Title (type or print)								
If change of registered office by registered agent, sign here. (See Note 6 below.) The undersigned, under penalties of perjury, affirms that the facts stated herein are true and correct.								
Dated	Month & Day	, Year	Signature of Registered Agent of Record					
	0							
	O. T.		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 (Iddress (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 egistered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.