| FORM NP-(11,11a) | UNO | FIC | ED | |
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ONE COPY ONLY TO BE FILED

FILING FEE - \$5,00

Please read instructions on back before attempting to execute.

-NOV 118 1985

5369-543-4

Secretary of State

CERTIFICATE OF CHANGE OF REGISTERED AGENT, AND REGISTERED OFFICE BY A FOREIGN OR DOMESTIC CORPORATION

under the 1 12 11 13 GENERAL NOT FOR PROFIT CORPORATION ACT 具有 新

Secretary of State, Springfield, Illinois:

| The undersigned corporation, organized and existing under the laws of the State of | Illinois |
|---|----------|
| for the purpose of charging its registered agent and its registered office, or both, in Illinois, | |
| Not For Profit Corporation Act." of Illinois, represents that: | |

| 1. | The name of the corporation is | Sculpture | Chicago, | Inc. | 1 ' | |
|----|--------------------------------|-----------|----------|------|-----|--|
| | | | | | | |

| | | | | | 1 | |
|-----|----------------------|-------------------------------|-------------------|-----------------------|-------------------------------|--------|
| 2 | The address inc | luding st set and number | her if any of its | precent registered | I office <i>(before chapu</i> | a) ie- |
| - | 7 77C BUU! 033, 1110 | transition and the transition | DOT 31 MILES | bi escur i efficience | control perote wiong | ·/ ۱»· |
| Опе | TRM Plaza. | Suite 4040. | Chicago. | Illinois | 60611 | |

| (| | | , i | 1 |
|------------|---|-------------------------------|-------------------|--------------------|
| [\\ 3.\ I | ts registered office (including street and number | , If any change in the regist | ered office is to | be made) is hereby |
| changed to | 55 E. Monroe, Ste 4100 | Chicago)(| Cook |) (60603 j |
| 7 | (Do not use a P.O. Box) | (City) | (County) | (ZIp Code) |

| 4. The name of its | present registered agent, (| betwee change) is | Jerome E | . Wexler | ····· |
|--------------------|-----------------------------|-------------------|----------|----------|-------|
|--------------------|-----------------------------|-------------------|----------|----------|-------|

| | | /) | | | • |
|----|---|----------|----|--------|---|
| 5. | The name of the new registered agent is | Jerome 1 | Ε. | Wexler | |

- 6. The address of its registered office and the address of the office of its registered agent, as changed, will be identical.
 - 7. The manner of authorization of such change(s) was:

 - b. X By action of its registered agent. A change, as provided under 7b, can be accomplished by the registered agent only when there is a change of address of the registered office of the corporation in this State.

SIGNATURES

(Sign below where the above change(s) were authorized by resolution of the board of directors,)

Under penalty of perjury and as an authorized officer of the corporation, I declare that this document has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

| IN | WITN | ESS | WHERE | OF, | 1 h | ave | here | unto | subscril | bed |
|------|------|-----|---------|------|-----|-----|------|------|----------|-----------|
| | | | affixed | | | | | | | |
| this | · | | da | y of | | | | | . 19 | · |
| | | | | | | | | | | |

| | | (P |
|---|--|----|
| 1 | | |

res, or Vice-Pres.)

(Title)

(Title)

(Sec. or Assist, Sec.)

(Sign below where the above change of culdress was authorized by action of the registered egent.)

Under penalty of perjury and as an authorized registered agent of the corporation, I declare that this document has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

| IN | WITNESS | WHER | REOF, 1/ | ave her | ounto si | Ibscribed |
|----|---------|------|------------|---------|----------|------------------|
| my | name on | this | | day | of | |
| 19 | | | NOV I | 3 1985 | 11 | 7/1 |
| | | J. | Mar. | 11/1/ | | ////// |
| | | 11 | 91 F F (1) | | WZZ | 11/1/ |

GENERAL NOT FOR PROFIT CORPORATION

SPRINGFIELD, ILLINOIS 62756 CORPORATION DEPARTMENT TELEPHONE (217) 782-6190 SECRETARY OF STATE

A PLEASE RETURN TO LISA A. MASCOLI A PROFESSIONAL CORPORATION HOLLEB & COFF 55 EAST MONROE, STE. 4100 CHICAGO, ILLINOIS 60603

MOTION

The corporation cannot act as its own registered the copy only of this cartificate need be filled.

bwever, une ame as the principal office of the corporation, the registered office may, but need not be the delities of the agent must be the same. distanted office and the office

tary of State on blanks furnished for that purpose. Any subsequent change in the registered office or gent must be reported immediately to the Secre-

JIAM

00

Coop County Clarks DEPT-01 RECURDING \$11.25 0308 12/24/85 09:55:00 85-336502

CHANGE OF REGISTERED AGENT AND

N 5369-543-4

FILING FEE, \$5.00

FORM NP-11, 11a

REGISTERED OFFICE

UNDER THE

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