

UNOFFICIAL COPY

LP 108 (Interim)
7/1/87 through 12/31/87

JIM EDGAR
Secretary of State
State of Illinois

87479216

C000486

Validation Only

FILED

AUG 31 1987

SECRETARY OF STATE

Submit in Duplicate

Filing fee \$20.00

APPLICATION TO ADOPT, CHANGE, OR CANCEL AN ASSUMED NAME (Illinois or foreign limited partnership)

Pursuant to the provisions of the Revised Uniform Limited Partnership Act, the undersigned limited partnership hereby submits the following application to (adopt), (change), or (cancel) an assumed name (strike inapplicable words).

- The true name of the limited partnership is: Petrolane Gas Service Limited Partnership
- The limited partnership's file number is: C000486
The Federal Employer Identification Number (F.E.I.N.) is: 33-0219137 (Note 1)
- The state or other jurisdiction under the laws of which the limited partnership is formed is: (Check one)
 Illinois (domestic), or
 other (foreign) Specify: Delaware
- TO ADOPT: The above named limited partnership intends to adopt and to transact business under the assumed name of:
Lightning Supply Limited Partnership (Note 2)
- TO CHANGE: The above named limited partnership intends to cease transacting business under the assumed name of:
_____ (old) and to adopt and transact business under
the assumed name of: _____ (new). (Note 2)
- TO CANCEL: The above named limited partnership intends to cease transacting business under the assumed name of:

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

One general partner must sign the application to adopt, change or cancel an assumed name.

Petrolane Incorporated

By: C. M. Harrington
Signature

C. M. Harrington, Assistant Secretary
Name (please print or type)

87479216

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Form LP 100 (Quarterly)
7/1/67 through 12/31/67

File No. _____

**APPLICATION TO ADOPT, CHANGE,
OR CANCEL AN ASSUMED NAME**

Filing Fee \$20

Payment must be made by Certified Check,
Cashier's Check, Illinois Attorney's Check,
Illinois C.P.A.'s Check or Money Order,
Payable to "Secretary of State."

DO NOT SEND CASH!

All correspondence regarding this filing will
be sent to the registered agent of the limited
partnership unless a self-addressed enve-
lope is included.

RETURN TO:

Secretary of State
Corporate Department
Limited Partnerships Division
Springfield, Illinois 62756
Telephone: (314) 437-9960



CLP-8 (3-1-67)

91262428

RETURN TO:

KEVIN S. HOEHLER
Post & Holmes
150 N. Michigan Ave. Suite 2500
Chicago, IL 60601



Property of Cook County Clerk's Office

- Note 1: If the Federal Employer Identification Number has not been obtained at the time of filing this document, it shall be obtained and shall be reported to the Secretary of State within 180 days after the date of filing the certificate of limited partnership (domestic) or the application for admission to transact business (foreign).
- Note 2: The assumed name must contain, without abbreviation, the words "limited partnership."
- Note 3: The right to use an assumed name shall be effective for a period of five years from the date of filing by the Secretary of State.

NOTES

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65774 # 2 * 57-479214
COOK COUNTY RECORDER