

# UNOFFICIAL COPY

LP 201

JIM EDGAR  
Secretary of State  
State of Illinois

88-534461

Submit in Duplicate

\$75.00 filing fee. See other side for acceptable forms of payment.

## CERTIFICATE OF LIMITED PARTNERSHIP (Illinois limited partnership)

Pursuant to the provisions of the Revised Uniform Limited Partnership Act, the undersigned general partners hereby form the limited partnership named below:

1 The limited partnership's name is: The Throop Group Limited Partnership (Note 1)

2 The Federal Employer Identification Number (F.E.I.N.) is: applied for (Note 2)

3 This certificate of limited partnership is effective on: (Check one)

a)  the filing date, or

b)  another date not more than 60 days subsequent to the filing date. Specify: \_\_\_\_\_

4 The limited partnership's registered agent's name and registered office address is:

Registered Agent: Collins, Jr. E. Thomas  
Last Name First Name Middle Name

Firm Name (if any) \_\_\_\_\_

Registered Office: 118 South Clinton Street 700  
(P.O. Box alone Number Street Suite #  
is unacceptable) Chicago Cook Illinois 60606  
City County Zip Code

5 The address, including county, of the office at which the records required by Section 104 are to be kept is:  
118 South Clinton Street, Chicago, Cook County, IL 60606

6 The limited partnership's purpose(s) is: to invest, directly or indirectly, in  
real property 6142

7 The latest date upon which the limited partnership is to dissolve is: December 31, 2038

8 The total aggregate amount of cash and the aggregate agreed value of other property or services contributed by the partners and which they have agreed to contribute is: \$ 1,000,00

9 A brief statement of the partners' membership termination and distribution rights, if any. One 8-1/2" x 11" standard paper may be used, if needed, and attached to this form. The full text of such rights should be on file in the partnership's Section 104 office.

10 The names (last name first) and business addresses of all general partners must be listed:

Huffman, Dennis J. 118 S. Clinton, Chicago, IL 60606  
General Partner's Name Business Address

Shaffer, John E. 118 S. Clinton, Chicago, IL 60606  
General Partner's Name Business Address

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

All general partners are required to sign the certificate of limited partnership.

See Attachment.

Signature [Signature]  
Name (please print or type) Dennis J. Huffman

Signature [Signature]  
Name (please print or type) John E. Shaffer

If additional space is needed, this list must be continued in the same format on a plain white 8-1/2" x 11" sheet which must be stapled to this form. Number of additional pages: 1

Return to: Jan Harris  
Box 416

CO03087 SOSIL 11/18/88  
75.00 IO 000002781 FILED

88-534461

# UNOFFICIAL COPY

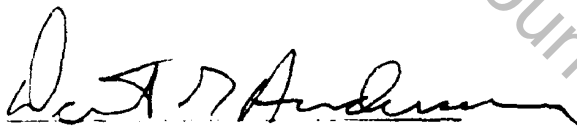
9. Partner's termination of membership and distribution rights:

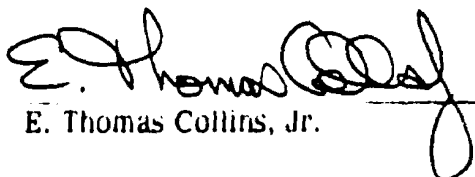
The Partners have no voluntary termination rights. Upon termination of the Partnership, the proceeds of liquidation shall be distributed to and among the Partners in accordance with the terms of the Partnership Agreement which is kept at the principal office of the Partnership.

10. Names and addresses of General Partners:

Anderson, Daniel G.  
118 South Clinton  
Chicago, Illinois 60606

Collins, Jr., E. Thomas  
118 South Clinton  
Chicago, Illinois 60606

  
Daniel G. Anderson

  
E. Thomas Collins, Jr.

88-534461

88-534461