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Secretary of State State of Illinois

Remit payment in Check or Money Order, payable to "Secretary of State".

Submit in Duplicate

DO NOT SEND CASH! 1/1/2

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE

This Space For Use By Secretary of State

Date

Filing Fee \$5,00

( )

	TRANS.					•	Clerk	1
	eby submi	the provisions of ts the following state	ement.					
1.	The nam	ne of the corporation	on is	HEALTH	133	nera Table	on Ecman	miritr
2.	The Stat	e or Country of in	corporatio	n is	166,0	9.5.		
3.	The nam	ne and address of it e of the Sacretary o Registered Agent	s registered f State ( <i>Be</i>	f agent and Fore Change	its register ) are:			
Ĩ.	The Line	Registered Agent	First Name	1.7 C.	Middle Man	EPS Red	Last Name	
83	18 1688	Registered Office	Number	0 LAX	E Cos	Sulte No. (A	). P.O. Hox ajone is not acc	eptable)
: :03,70 <sup>†</sup>	iari ci sic Depai	ktwo <sub>ui</sub> u <sub>i</sub>	City	1410 G	C 3 V E Zip Code	6003	County	
34017	atiffie nam Herein R	Registered Office  (C)  (C)  (C)  (C)  (C)  (C)  (C)  (C	its register	eu agent an	d its regist	ered office	shall be (After )	Ill Changes
		Registered Agent	Eiest Nami		Middle Nom	μ	Last Name	
		Registered Office	Number	3 1 3/	Street	5ulte No. (A F	O. Box alone is not acce	ptable)
<u>;</u>		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	City 52.	<u>.cmHurt</u>	Zip Code	100149	County	· DuPAG
5.		ress of the register ed, will be identical.		ind the add	ress of the	busir.es c	office of the regist	ered agent,
6.	The abov	re change was autho	rized by:	("X" one bo	x only			
		By resolution duly By action of the re			of director	rs.	(Note (1)	
. •	The und	by the board of dir ersigned corporatio affirm, under pena	n has caus	sed this state	ement to b			ed officers,
Dat	ed	1-9	, <u>19</u> 5	<u> 38</u> h	AFXC		SOCIETES OF AMERICANS	ECHNORL)
atte	ested by	tenature of Secretary or A			by <u>//</u>	-	resident or vice president	<i>*</i>
	<del></del> -	(Type or Print Name			<del></del>		rint Name and Title)	
(If c		egistered office by a ersigned, under pena					herein are true.	
Dati	ed		, 19	***********		/Slanature of !	aulsterad Laure of D	
						to Ruamite of F	Legistered Agent of Reco	ra j

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- 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, a post office box number alone is not acceptable.
  - 3. A corporation cannot act as its own registered agent.
  - 4. If the registered office is changed from one county to another, then 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 arent must be by resolution adopted by the board of directors. This statement must then be signed by the President (or vice-president) and by the Secretary (or an assistant secretary).
  - 6. The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent.

APR-21-88

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Form BCA-5,10/5,20

STATEMENT OF CHANGE OF REGISTERE AGENT AND/OR REGISTERED OFFICE

Filing Fee \$5.00

RETURN TO:

Corporation Department Secretary of State Springfield, Illinois 62756 Telephone 217 – 782-7808