LP 201

UNOFFICIAL COPY

Secretary of State
State of Illinois

Submit in Duplicate

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

CERTIFICATE OF LIMITED PARTNERSHIP (Illinois limited partnership) 88266863

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566100 75:00 Pursuant to the provisions of the Revised Uniform Limited Partnership Act, the undersigned general partners hereby form the limited partnership named below: The limited partnership's name is: County Line Square Limited Partnership (Note 1) The Federal Employer Identification Number (F.E.I.N.) is: applied for (Note 2) This certificate of limited partnership is effective on: (Check one) a) x the filing date, or b) \_\_\_\_another dz.e not more than 60 days subsequent to the filing date. Specify: The limited partnership is repistered agent's name and registered office address is: Lawrenco Registered Agent: Program Last Name First Name Middle Name Ash, Anos, Freedman & Logan Firm Name (if any) 77 West Washington Street 1211 Registered Office: Suite# (P.O. Box alone Number Street Is unacceptable) Chicago Cook Zip Code 60602 City County The address, including county, of the office at which the records required by Section 104 are to be kept is: Two Mid America Plaza, Suite 714, Oakbrook Terrace, 11 60181 (DuPage County) The limited partnership's purpose(s) is: acquire and develop cartain property located in the 6. Village of Burr Ridge, Illinois, 266 (3) January 2, 2008 The latest date upon which the limited partnership is to dissolve is: 7 The total aggregate amount of cash and the aggregate agreed value of other property or services contributed by the partners and 8. which they have agreed to contribute is: \$ 1,000,00 A brief statement of the partners' membership termination and distribution rights, if any. One 8-1/2" x 14" six stard 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. SEE EXHIBIT "A" ATTACHED HERETO 10. The names (last name lirst) and business addresses of all general partners must be listed: Two Mid America Plaza, Sulte 714 James P. Avgerts Business Address Onkbrook Terrace, IL General Partner's Name Mel G. Holms Two Mid America Plaza, Suite 714 Business Address Onkhrook Terrace, II, 60181 General Partner's Name 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. Signature Signature Mel G. James P. Avgeris He lmn Name (please print or type) Name (please print or type)

#### NOTES

Note 1: The name of the limited partnership must contain, without abbreviation, the words "limited partnership."

Note 2: 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 this certificate.

Note 3: If this office is outside of Illinois, it must be the limited partnership's principal place of business.

REZEFRER

RETURN TO:

Limited Partnership Division Felephone (217) 785-8960 Springfield, Illinois 62756 Corporation Department Secretary of State

Cashier's Check. Minois Anomey's Check. Payment must be made by Certified Chech Minois C.P.A's Check or Money Payable to Secretary of State.

DO NOT SEND CASH!

Property of Cook County Clark's Office be sent to the registered agent of the limited All correspondence regarding this filting will partnership unless a self-addressed enveboe is included.

LIMITED PARTNERSTAP

Filling Fee \$75

CERTIFICATE OF

Form LP 201

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#### CONTINUED

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

Gerald Kostelny General Partner's Name

33 West Monroe Street, Chicago, IL 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.

Gerald Kostelny Name (please print or type)

Cot County Clert's Office

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COOK COUNTY CLOTHES OFFICE

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Property of Cook County Clerk's Office

#### 19. Termination and Dissolution

19.1 The Partnership shall be terminated and dissolved upon the first to occur of any of the following events:

19.1.1 The termination date set forth in Paragraph 7.

19.1.2 The sale, exchange, or involuntary conversion of all, or substantially of the non-cash assets of the Partnership.

19.1.3 The acquisition by one faither of all Units of Interest in the Partnership.

19.1.4 The sale to a third party as provided in Section 18.3.

shall immediately commence to wind up its affairs. The majority in interest of the General Partners shall in their sole discretion, determine whether to sell or otherwise liquidate any or all of the Partnership assets. It shall be in the mole discretion of the majority in interest of the General Partners to determine on what terms and conditions to sell and at what time and no Limited Partner shall have any right to demand property other than cash.

19.3 As soon as is proclicable after the date of dissolution, the remaining assets and/or proceeds of liquidation shall be distributed in the following order of priority:

19.3.1 Payment of all deris, liabilities and expenses of the Partnership, including loan; made by any of the Partners.

determined in the sole discretion of the General Partners, for any contingent or unforeseen liabilities or obligations of the Partnership. At such time as the majority in interest of the General Partners determine that any or all of such sums so reserved shall no longer be required, such amounts shall be distributed as hereinafter provided.

19.3.3 The payments as provided in Paragraph 11.2 hereof to the extent same have not been paid as provided therein.

19.3.4 The remainder, if any, shall be distributed in the ratio in which the Units owned by each Partner bear to the total number of Units owned by all of the Partners.