BCA 5.10/f	5,20 (Rov. Jul. 1984)	OFFIC 89471135	CIAL (	COP	Me #5D. 5"243 40	124-2
Sub	bmit in Duplicate	* * * *	EDGAR * iry of State	•	This Space For Use By Secretary of State	
Remit payın	ment in Check or Money table to "Secretary of		of Illinois	•	Date	
State".	NOT SEND CASH!		GE OF REGISTERI ND/OR RED OFFICE	ED AGENT	Filing Fee \$5,00	
		MENIGYE:	IED UTTION		Clerk P	}
			poration Act		the undersigned corporation	
•	bmits the following stat	Ca	**********		PT-01 RECORDING	\$12.
1. The n	name of the corporatio	on is	Internat	والمراجع والمستخبر والمستود والمستود	1000K COUNTY RECORDER	16:37:00 .1 <b>9</b> 5
- The	The state of in	tan In	ILLINOIS			
	State or Country of inc	•	······································	·		•
	name and ecidrass of its office of the Secretary o	of State (Before Chan		ed office as th	hey appear on the records of	
- 11 F	Registered Agent	Joseph	В.		Cagney	
Ell-	* Lindiator and Line	First Name	Middle Name	18	Lest Name	
<b>N</b>	1988 gistered Office	2500 Prudentia		4		
"110 B	10 120	Num/er		Sulte No. (A F.C	O. Box sions is not acceptable)	
tho-	e state	Chicago,	60601		Cook	
~ ~ cretar	ny of State  Reported: FFFECT	City	Zip Coae		County shall be (After All Changes	
Cottory)	named and address of it Reported): EFFECT	its registered againt. TIVE SEPTEMBE!	and its registr	ered office st	hall be (After All Changes	
One	Registered Agent .	Joseph	O, B.		Cagney	
	110green and	First Name One Prudential	Kyai Name	,	Last Name	
	Registered Office	_130_East_Rando	oloh Driv	3800		016
	<del>-</del>	Number	Street S		Box alone is not acceptable)	000
		Chicago	60601		Cook	
		City	Zip Code	(C)	County	
	address of the registere anged, will be identical.		idress of the	business of	floe of the registered agent,	
3. The ab	bove change was author	rized by: ("X" one	box only)		-89-471195	
a. 🗆		y adopted by the boar	•	rs.	(Note 5)	
b. K	XX By action of the re	•		•	(Note 6)	
	ed by the board of dire		- Note 1)		-(2)	
The ur		n has caused this sta	latement to be		ts duly authorized officers, true.	
		• • • • • • • • • • • • • • • • • • • •			ional, Ltd.	
ä(60		10			of Corporation)	
ttested by .	(Signature of Secretary or Ass	sistant Secretary)	bγ	Signature of Presi	ident or vice president)	
	(Type or Print Name &	and Title)		(Type or Print	t Name and Titlej	
	of registered office by rendersigned, whole penalt				rein are true.	
	rust 17	•		7 11	11.	
պատ. ոցքն	,1181_1_1181	, IAGE		for the		

## **UNOFFICIAL COPY**

RETURN TO: BOX 272

(1. ) and . of 1

ATTN: Robert A. Schelinski

SOOF COOK COUNTY CLOPE'S OF -89-471195

Mary the first of the second s