

10.00

BCA 5.10/5.20 (Rev. Jul. 1984)

JIM EDGAR  
Secretary of State  
State of Illinois

|   |        |
|---|--------|
| This Space For Use By<br>Secretary of State |        |
| Date  |        |
| Filing Fee                                  | \$5.00 |
| Clerk                                       | E.M.   |

Submit in Duplicate  
Remit payment in Check or Money  
Order, payable to "Secretary of  
State".  
**DO NOT SEND CASH!**

STATEMENT OF CHANGE OF REGISTERED AGENT  
AND/OR  
REGISTERED OFFICE

Pursuant to the provisions of "The Business Corporation Act of 1983", the undersigned corporation hereby submits the following statement.

1. The name of the corporation is SURGICAL SYSTEMS & INSTRUMENTS, INC.

2. The State or Country of Incorporation is ILLINOIS

3. The name and address of its registered agent and its registered office as they appear on the records of the office of the Secretary of State (Before Change) are:

Registered Agent: David R. Shevitz  
First Name Middle Name Last Name

Registered Office: 525 W. Monroe Street Suite 1600  
Number Street Suite No. (A P.O. Box alone is not acceptable)  
Chicago 60606-3693 Cook  
City Zip Code County

4. The name and address of its registered agent and its registered office shall be (After All Changes Herein Reported):

Registered Agent: Charles J. Martin  
First Name Middle Name Last Name

Registered Office: 506 N. Milwaukee Avenue  
Number Street Suite No. (A P.O. Box alone is not acceptable)  
Libertyville, 60048 Lake  
City Zip Code County

049

89203154

5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.

6. The above change was authorized by: ("X" one box only)

- a.  By resolution duly adopted by the board of directors. (Note 5)
- b.  By action of the registered agent. (Note 6)

(If authorized by the board of directors, sign here. See Note 5)

The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirm, under penalties of perjury, that the facts stated herein are true.

Dated January 18, 19 88

SURGICAL SYSTEMS & INSTRUMENTS, INC.  
(Exact Name of Corporation)

attested by [Signature]  
(Signature of Secretary or Assistant Secretary)

by [Signature]  
(Signature of President or vice president)

Samuel Shiber  
(Type or Print Name and Title)

Samuel Shiber  
(Type or Print Name and Title)

(If change of registered office by registered agent, sign here. See Note 6)

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

Dated \_\_\_\_\_, 19 \_\_\_\_\_

\_\_\_\_\_  
(Signature of Registered Agent of Record)

# UNOFFICIAL COPY

## NOTES

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 agent* 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.

DEPT-01 \$12.00  
T#5555 TRAN 8560 05/05/89 13:27:00  
#3426 # E \* - 89 - 203154  
COOK COUNTY RECORDER

Form BCA-5.10/5.20

File No. D 5460 800 4

STATEMENT OF CHANGE OF REGISTERED  
AGENT AND/OR REGISTERED OFFICE

Filing Fee \$5.00

SURGICAL SYSTEMS & INSTRUMENTS INC.

RETURN TO:

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

C-136.4

89203154

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