Registered Agent Department City Department Department City David City Department Depart			90139394	7	
Secretary of State Remin payment in Check or Money Order, psychole to "Secretary of State of Illinois STATEMENT OF CHANGE OF REGISTERED ABENT AND/OR REDISTERED OFFICE Pursuant to the provisions of "The Business Corporation Act of 1983", the undersigned corporatereby submits the following statement. Lama Temple Corporation The name of the corporation is The name and orderess of its registered agent and its registered office as they appear on the record of the Secretary of State (Before Change) are: Registered Agent Registered Office Registered Office Registered Office Registered Agent Registered Agent Registered Agent Registered Agent Registered Agent Registered Office Registered Office Registered Office Registered Agent Registered Office Registered Office Registered Agent Registered Office Registered Agent Registered Agent Registered Office Registered Agent Registered Office		NOFFIC	EDGARI SC	3 9 4	
David Septemble to "Secretary of STATEMENT OF CHANGE OF REGISTERED ABENT AND/OR REDISTERED OFFICE Pursuant to the provisions of "The Business Corporation Act of 1983", the undersigned corporereby submits the following statement. Lama Temple Corporation The name of the corporation is Lama Temple Corporation The name and oddress of its registered agent and its registered office as they appear on the recording of State (Refore Change) are: Registered Agent For Name Middle Name Land Name Registered Office The Name State State (Refore Change) are: Registered Office Chiero 50601 Cook Name Chiero 50601 Cook County The name and address of its registered agent and its registered office shall be (After All Chiero 50601 Cook Name Registered Agent Registered Agent Registered Agent Agent Registered Agent Registered Office Name State No. (A. R.O. Box alone is not acceptable). Registered Office Over State Name County The name and address of its registered agent and its registered office shall be (After All Chiero 50601 Cook Name County State Name County State Name County State Name County Name Name Name Name Name Name Name Name	Submis in Duplicate		• .		
Pursuant to the provisions of "The Business Corporation Act of 1983", the undersigned corporated by submits the following statement. 1. The name of the corporation is	Order, payable to "Secretary	of			8-91
Clerk Sk. Pursuant to the provisions of "The Business Corporation Act of 1983", the undersigned corporatereby submits the following statement. Lama Temple Corporation Lama Temple Corporation The name of the corporation is		A	ND/OR	Filing Fee \$	5.00
Lama Temple Corporation Lama Temple Corporation Lama Temple Corporation Lama Temple Corporation Lama Temple Corporation Lama Temple Corporat		REGISTI	ERED OFFICE	Clerk 5	
The name of the corporation is Lama Temple Corporation The State or Country of incorporation is Illinois The name and eduress of its registered agent and its registered office as they appear on the record office of the Secretary of State (Before Change) are: Registered Agent David Apter Registered Office Registered Office On North La Salle Street, Suite 1715 Rumber Saute No. IA F.O. Box alone is not acceptable) Chrono 60601 Cook Chrono 5000 County The name and address of its registered agent and its registered office shall be (After All Chemein Reported): Registered Agent Pavide Registered Agent Pavide Nonthbrook Found Foundation Registered Office Number Number Number Street, Suite 160 The address of the registered office and the address of the business office of the registered as changed, will be identical. The above change was authorized by: ("X" one box only) a. The stove change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. (Note 5) The undersigned corporation has caused this statement to be signed by its duly authorized off each of whom affirm, under penalties of perjury, that the facts stated herein are true. (Sugnature of Secretary or Austrant Secretary) (Exact Name of Corporation) (Type or Print Name and Title)	· · · · · · · · · · · · · · · · · · ·		rporation Act of 1	983", the undersigned c	orpora
The State or Country of incorporation is	•	Lama	Temple Corpor	ation	
The name and odures of its registered agent and its registered office as they appear on the record of the Sec etary of State (Before Change) are: Registered Agent Ferx Name Middle Name Lon Name Registered Office 150 North La Salle Street, Suite 1715 Registered Office 150 North La Salle Street, Suite 1715 Registered Office 150 North La Salle Street, Suite No. (A.P.O. Box alone is not acceptable) Chicago 60601 Cook City Zip Code County The name and address of its registered agent and its registered office shall be (After All Chicago 6050 Dundee Road, Spite 160 Registered Office 150 Dundee Road, Spite 160 Northbrook 60062 City Zip Code County The address of the registered office and the address of the business of the registered agent as changed, will be identical. The above change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. (Note of the registered agent. (Note of the undersigned corporation has caused this statement to be signed by its duly authorized off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. 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.	1. The name of the corpor	ration is			مسم ہیو نے
Registered Agent David Apter Registered Office Registered Registered Office And Italian Sures, Sur	2. The State or Country o	f incorporation is	llinois		
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Pation Department Chrone 60601 Cook City Zip Code County The name and address of its registered agent and its registered office shall be (After All Chrome Registered Agent Part Name Agent Agent First Name Agent Age	B 0 8 1930 Bodistered Of	fice OEO North	La Salle Stree	et. Suite 1715	
The name and address of its registered agent and its registered office shall be (After All Che Herein Reported): Registered Agent Registered Office Road, Solite 160 Registered Number Street Suite No. (A.P.O. Box alone is not acceptable) Cook Cook County The address of the registered office and the address of the business office of the registered as changed, will be identical. The above change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. By action of the registered agent. (Note o) The undersigned corporation has caused this statement to be signed by its duly authorized off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. (Exact Name of Corporation) Registered Agent Registered Agent Road Road, Solite 160 Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road R	etalü	Number			ptable)
The name and address of its registered agent and its registered office shall be (After All Che Herein Reported): Registered Agent Registered Office Road, Solite 160 Registered Number Street Suite No. (A.P.O. Box alone is not acceptable) Cook Cook County The address of the registered office and the address of the business office of the registered as changed, will be identical. The above change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. By action of the registered agent. (Note o) The undersigned corporation has caused this statement to be signed by its duly authorized off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. (Exact Name of Corporation) Registered Agent Registered Agent Road Road, Solite 160 Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road R	tary of June 10	Chirano	<u> </u>	Cook	
The name and address of its registered agent and its registered office shall be (After All Che Herein Reported): Registered Agent Registered Office Road, Solite 160 Registered Number Street Suite No. (A.P.O. Box alone is not acceptable) Cook Cook County The address of the registered office and the address of the business office of the registered as changed, will be identical. The above change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. By action of the registered agent. (Note o) The undersigned corporation has caused this statement to be signed by its duly authorized off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. (Exact Name of Corporation) Registered Agent Registered Agent Road Road, Solite 160 Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road, Solite 160 Road Road Road R	Leray Departition.	City			
Registered Office Registered Office 650 Dundee Road, Soite 160 Number Street Suite No. (A.P.O. Box alone is not acceptable) Northbrook 60062 City Zip Code County The address of the registered office and the address of the business of the registered as as changed, will be identical. The above change was authorized by: ("X" one box only) a. By resolution duly adopted by the board of directors. (Note of the registered agent. 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 off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. (Signature of Secretary or Assistant Secretary) (Signature of Periodent or vice president) (Type or Print Name and Title) (Type or Print Name and Title) The undersigned, under penalties of perjury, affirms that the facts stated herein are true.	Merein Reporteus.	_{ent} David		Apter	
Northbrook 60062 City Zip Code County The address of the registered office and the address of the business office of the registered as changed, will be identical. 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 5) The undersigned corporation has caused this statement to be signed by its duly authorized off whom affirm, under penalties of perjury, that the facts stated herein are true. The address of Secretary or Assistant Secretary) Type or Print Name and Title) Type or Print Name and Title) Type 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.	Tragistered rig	First Name	M'sele Name	Last Name	
Number Street Suite No. (A.P.O. Box alone is not acceptable) Northbrook 60062 City Zip Code County The address of the registered office and the address of the business of the registered as changed, will be identical. The above change was authorized by: ("X" one box only) a.	Pagistared Off	650 Dundee	Road, Suite :	160	X
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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 off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. Oated	a. Dy resolution	duly adopted by the bo	pard of directors.	· (Note S)	्र
The undersigned corporation has caused this statement to be signed by its duly authorized off ach of whom affirm, under penalties of perjury, that the facts stated herein are true. James James	Ben	• •		(Note o.	
ttested by	If authorized by the board of The undersigned corpor	ation has caused this :	statement to be sign	ed by its duly authorize	d offic
(Exact Name of Corporation) ttested by			it the facts stated he	ein are true.	
(Type or Print Name and Title) (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	(E	xact Name of Corporation)	 .
(Type or Print Name and Title) (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.	(1)		•		
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.	Signature of Secretary	or Assistant Secretary)	Signan	ire of President or vice president)	
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.	(Type or Print !	vame and Title)	<u> </u>	pe or Print Name and Title)	
	If change of registered office	by registered agent, sig	n here. See Note 6) firms that the facts s	tated herein are true.	
January 26 19 90			1		
(Signature of Registered Agent of Record)	Dated <u>January 26</u>	<u> </u>	V /	and and and	

UNOFFICIAL COPY

Cook County Clark's Office T#5555 TRAN 0804 03/29/90 15:02:00 #1454 # E *-90-139394 COOK COUNTY RECORDER

KANTOR & APTER, LTD. 650 DUNDEE RD., SUITE 160 NORTHBROOK, IL 60062