## **UNOFFICIAL COPY**

В	CA 5.10/5.2	0 (Rev. Jul. 1984)	90220405			Eilo 4 51	19-883-2
Submit in Duplicate			JIM EDGAR			File # 5119-883-2	
Re	emit paymei	it in Check or Money	Secretary of State State of Illinois			Secretary of State  Date 2 - 8 - 9	
Ori	der, payabi ate".	le to "Secretary of					
0.0	DO NOT SEND CASH!		STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE		Filing Fee	\$5.00	
						Clerk 5	-t
Pui her	rsuant to reby subm	the provisions of its the following sta	"The Business Corp	poration Act of	1983", the	undersigned	corporation
1.		ne of the corporation		do Toy Corpo		-1	
		— Q			TT	CO	200400
2.		te or Country of in		linois		JUZ	22,404.20
3.	The nam the offic	ne and address of it e of the Secretary o	s registered agent ar f State <i>Usefore Chan</i>	nd its registered of	fice as they	appear on ti	ne records of
FILI	ED	Registered Agent	David			Apter	
	Marie Marie		First Name	Middle Name	1	ast Name	
	-000	Registered Office		Salle Stre	et, Sui	te 1715	
FEB 0	8 1990 ·			atteet Zuite	No. 14 P.O. Bo	x alone is not ac	ceptable)
		•	Chicago	6 1601		Cook	
secretary	of State	ر ما داد استگاهه	• •	Zin Code		County	
rporation	Departur		ts registered agent a	and its registered	office shal	be (After .	All Changes
		Registered Agent _	David		Z, r	pter	
		D 1	First Name	Middle Name	Lo	ist Name	
		Registered Office _	650 Dundee R				$\times$ $/_{1}$
		_	Northbrook	Street Suite N	io. (A P.O. ao)	Sook	ptable)
			City	Zip Code	· · · · · · · · · · · · · · · · · · ·	Cow	
5.	The address as changed	ess of the registered I, will be identical.	d office and the ad	dress of the busin	ness office	of the regist	ered agent,
6. ·	The above	change was authori	zed by: $("X" one b$				
i	a. [ ]	By resolution duly a	adopted by the board	ox onty)			Vic.
ł	b. 🔀	By action of the reg	istered agent	a of directors.		ote 5)	
(If au					(N	ote 6)	C
			ctors, sign here. See has caused this states of perjury, that the		ed by its du	ıly authorize	ed officers,
Dated			10	is tusts stated field	em are true.	•	
			, 13	/Ex	act Name of Co	an anada u l	
atteste	ed by	ature of Secretary or Assis					•
· Fugally	(Sign	ature of Secretary or Assis	tant Secretary)	by	e of President of	IF IIIca praeidanal	
			.:1				
		(Type or Print Name and	d Title)	Тур	e or Print Name	and Title)	
(If cha T	inge of reg he unders	<i>istered office by reg</i> gned, under penalti	<i>istered agent, sign he</i> es of perjury, affirm	_			
Dated	J;	anuary 26	10 90	/ /			
			, 18 <u></u>	181000	/   /	Agent of Record	
				(signatur	द श्र Kegistered	Agent of Record	<b>y</b> –

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