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Form LP 1110
(Rev. Jan. 1991)

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SUBMIT IN DUPLICATE!

GEORGE H. RYAN
SECRETARY OF STATE
STATE OF ILLINOIS

91485876

REINSTATEMENT FEE \$100
PLUS +
PENALTY AMOUNT(\$6) \$ 200
TOTALS 300

APPLICATION FOR REINSTATEMENT
CERTIFICATE OF LIMITED PARTNERSHIP
APPLICATION FOR ADMISSION

OFFICE USE ONLY

C004155 SOSIL 09/18/91
100.00 RS 0000011306 FILED

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope is provided.

91485876

- Limited partnership's name: Kingston Court Limited Partnership
 . DEPT 01 RECORDINGS 413.00
 . T41111 TRAN 4187 09/18/91 15:04:00
 . ~~91485876~~ 91485876
 . COOK COUNTY RECORDER
- File Number Assigned by the Secretary of State: C004155
- Federal Employer Identification Number (F.E.I.N.): 36-3641322
- Admitting name (foreign only) or assumed name, if any, under which the limited partnership is transacting business in Illinois: _____
- State of jurisdiction: Illinois 91485876
- The application for reinstatement is to return the limited partnership to good standing: (Check and complete where appropriate)
 - a) \$100 for failure to file the biennial renewal report within 90 days after the anniversary date.
 - b) \$100 for failure to file a "Certificate to be Governed" in the specified time allowed. (prior to 1/1/90)
 - c) \$100 for failure to maintain a registered agent in this state as required.
 - d) \$100 for failure to report a FEIN within 180 days after filing the initial document with the Secretary of State.
 -
 - e) Other (specify)
 - a) Failure to submit Certificate of Good Standing and/or Certificate of Existence.
 - b) Failure to renew required assumed name.

Penalty of \$100 for each delinquency checked in item number 6 (a through d above).

The penalty amount is: \$ 200.00 . (ENTER ABOVE)

This application must be accompanied by all delinquent reports and/or documents together with the filing fees and penalties required.

1300

C004155 SOSIL 09/18/91
100.00 XF 0000011307 FILE

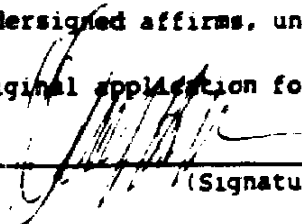
(OVER)

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100.00 XF 0000011308 FILED

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

The original application for reinstatement must be signed by at least one general partner.



(Signature)

Dennis J. Hiffman

General Partner

(Type or print Name and Title)

(Name of General Partner if a corporation or other entity)

(Signature must be in ink on an original document. Carbon copy, photo copy or rubber stamp signature may only be used on conformed copies).

FORMS OF PAYMENT:

Payment must be made by Certified Check, Cashier's Check, Illinois Attorney's Check, Illinois C.P.A.'s Check or Money Order, Payable to "Secretary of State".

RETURN TO:

Secretary of State
Department of Business Services
Limited Partnership Division
Room 330 Centennial Building
Springfield, Illinois 62756
Telephone: (217) 785-8960

DO NOT SEND CASH!

91485876

PROPERTY OF COOK COUNTY CLERK'S OFFICE

Box 416
JMH