

BCA 5.10/5.20 (Rev. Jul. 1984)
NFP-105.10/105.20 (Rev. 1986)

GEORGE H. RYAN
Secretary of State
State of Illinois

File # N 3792-574-8

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

This Space For Use By Secretary of State	
Date	3-6-91
Filing Fee	\$5
Clerk	B

Pursuant to the provisions of "The Business Corporation Act of 1983", or "The General Not For Profit Corporation Act of 1986", the undersigned corporation hereby submits the following statement.

- The name of the corporation is ALBERT H. COHN FOUNDATION
- The State or Country of incorporation is ILLINOIS
- 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	LEONARD	POPOWCR
First Name	Middle Name	Last Name
Registered Office	300 S. RIVERSIDE PLAZA	SUITE 1100
Number	Street	Suite No. (A P.O. Box alone is not acceptable)
CHICAGO	60606	COOK
City	Zip Code	County

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

Registered Agent	LEONARD	POPOWCR
First Name	Middle Name	Last Name
Registered Office	35 E. WACKER DRIVE	SUITE 902
Number	Street	Suite No. (A P.O. Box alone is not acceptable)
CHICAGO	60601	COOK
City	Zip Code	County

- The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
- The above change was authorized by: ("X" one box only)
 - By resolution duly adopted by the board of directors. (Note 5)
 - 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 MARCH 1, 1991

attested by ELIZABETH C. COHN, SECY.
(Signature of Secretary or Assistant Secretary)
Elizabeth C. Cohn
(Type or Print Name and Title)

by DAVID D. COHN, PRESIDENT
(Signature of President or Vice President)
David D. Cohn
(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)

FILED
MAR 06 1991

GEORGE H. RYAN
SECRETARY OF STATE



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SECRET

Office

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-91-151416

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T#2222 TRAN 7713 04/04/91 09.4
#0688 # B *-91-1514
COOK COUNTY RECORDER



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