Form BCA-5.1 OF REGISTERED AGENT NFP-105.10 AND/OR REGISTERED OFFICE 5491-373-7 SUBMIT IN DUPLICATE (Rev. Jan. 1991) George H. Ryan This space for use by Secretary of State Secretary of State Department of Business Services FEB 22 1991 Date 2-22-91 Springfield, IL 62756 Telephone (217) 782-6961 Filing Fee \$ 5 GEORGE H. RYAN Remit payment in check or money SECRETARY OF STATE order, payable to "Secretary of State. Approved: CORPORATE NAME: LYNWOOD TIRE CENTER, INC. 1. 2. STATE OR COUNTRY OF INCORPORATION: \_\_\_\_\_ILLINDIS 3. Name and address of the egistered agent and registered office as they appear on the records of the office of the Secretary of State (Before Change): Registered Agent \_ **O'BRIEN** First Van e Middle Name Last Name 2555 W. LINCOLN HIGHWAY 203 Registered Office. Suite No. (A P.O. Box alone is not acceptable) Number Street COOK OLYMPIA FIELDS 60461 City Zip Code County Name and address of the registered agent and registered office shall be (After All Changes Herein Reported): KRYGSHELD JOHN Registered Agent/\_\_ First Name *M∙udie Name* Last Name 2390 GLENWOOD-DYER RD. Registered Office Number Suite No. (A P.O. Box alone is not acceptable) Stre :t COOK 60411 LYNWOOD County The address of the registered office and the address of the business of the registered agent, as 5. changed, will be identical. The above change was authorized by: ("X" one box only) a. X By resolution duly adopted by the board of directors. (Note 5) b. By action of the registered agent. (Note 6) NOTE: When the registered agent changes, the signatures of both President and Secretary are required. (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 affirms, under penalties of perjury, that the facts stated herein are true. February 13, 19 91 LYNWOOD TIRE CENTER, INC. Dated \_\_ (Signature of Secretary or Assistant Secretary) (Signature of President or Vice President) JOHN A. KRYGSHELD -ANNA MAE KRYGSHELD - SECY (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

(Signature of Registered Agent of Record)

LANSING, IL 60438

MAIL TO.

DOVRIES & ASSOC. 1 WRIGHT STREET

ENTOFICHANGE

91154944

## **UNOFFICIAL COPY**

Serry or Coot County Clert's Office

MAKIA SEVELEN CONTRACTORNICS TOWN.

4464GT-T6-

COOK COUNTY RECORDER

#1018 # B \*-3T-T24644 T#2222 TRAN 7826 64/65/91 12:59:00 DEPT-BL RECORDING

\$13.29