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Form LP 201
(Rev. Jan. 1991)

Filing Fee \$75

SUBMIT IN DUPLICATE!

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope with pre-paid postage is included.

GEORGE H. RYAN
Secretary of State
State of Illinois

Assigned by Secretary of State

CERTIFICATE OF LIMITED PARTNERSHIP (Illinois limited partnership)

OFFICE USE ONLY

COO6806 5051L 06/05/92
75.00 10 0000012946 8125

92408045

1. Limited partnership's name: 44th Place L.P.

2. The address, including county, of the office at which the records required by Section 104 are to be kept is: (Post office box alone and c/o are unacceptable) 160 North LaSalle Avenue, Chicago, Cook, Illinois 60607

3. Federal Employer Identification Number (F.E.I.N.): _____ Applied For

4. This certificate of limited partnership is effective on: (Check one)
a) the filing date, or b) _____ another date later than but not more than 60 days subsequent to the filing date: _____
(month, day, year)

5. The limited partnership's registered agent's name and registered office address is:

Registered agent:	<u>BARRY</u>	<u>B.</u>	<u>NEKRITZ</u>
	First name	Middle name	Last name
Registered Office:	<u>c/o ALTHEIMER & GRAY</u>	<u>10 South Wacker Drive</u>	<u>Suite 4000</u>
(P.O. Box alone and c/o are unacceptable)	Number	Street	Suite #
	<u>Chicago</u>	<u>Cook</u>	<u>Illinois 60606</u>
	City	County	Zip Code

6. The limited partnership's purpose(s) is: owning, acquiring, holding, operating, and leasing improved real estate and any other lawful business

IRS Industrial Code Number is: 5530

DEPT-01 RECORDING \$23.00
 143333 TRAM 8873 06/07/92 14338700
 48445 & C * -92-408045
 COOK COUNTY RECORDER

7. Dissolution date is: Perpetual or December 31, 2042
(month, day, year)

8. The total aggregate dollar amount of cash, property and services contributed by all partners is: (per Section 201-5) \$500,000

9. A brief statement of the partners' membership termination and distribution rights:

SEE ATTACHED EXHIBIT A


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10.

NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

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

All general partners are required to sign the certificate of limited partnership.

SIGNATURE AND NAME		BUSINESS ADDRESS	
1.  (Signature)		1. 160 North Loomis Avenue Number Street	
Gary N. Neman, President (Type or print name and title)		Chicago City/town	
RANDOLPH PICKLE CORPORATION (Name of General Partner if a corporation or other entity)		Illinois State	60607 Zip Code
2. _____ (Signature)		2. _____ Number Street	
_____ (Type or print name and title)		_____ City/town	
_____ (Name of General Partner if a corporation or other entity)		_____ State	_____ Zip Code
3. _____ (Signature)		3. _____ Number Street	
_____ (Type or print name and title)		_____ City/town	
_____ (Name of General Partner if a corporation or other entity)		_____ State	_____ Zip Code
4. _____ (Signature)		4. _____ Number Street	
_____ (Type or print name and title)		_____ City/town	
_____ (Name of General Partner if a corporation or other entity)		_____ State	_____ Zip Code
5. _____ (Signature)		5. _____ Number Street	
_____ (Type or print name and title)		_____ City/town	
_____ (Name of General Partner if a corporation or other entity)		_____ State	_____ Zip Code
6. _____ (Signature)		6. _____ Number Street	
_____ (Type or print name and title)		_____ City/town	
_____ (Name of General Partner if a corporation or other entity)		_____ State	_____ Zip Code

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(Signatures must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures 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."

DO NOT SEND CASH!

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

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EXHIBIT A

TO FORM LP 201
CERTIFICATE OF LIMITED PARTNERSHIP
FOR
44TH PLACE L.P.

Rights of the partners to distributions are (a) at the discretion of the General Partner (b) pro rata in accordance with their respective Partnership Interests, or (c) upon liquidation of a Withdrawn Partner's Interest or dissolution of the limited partnership, which are addressed in Articles 11 and 13, respectively, of the Agreement of Limited Partnership of 44th Place L.P., on file at the office of the limited partnership.

Property of Cook County Clerk's Office

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NMP
Box 6