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Form LP 201 (Rev. Jan. 1991)

GEORGE H. RYAN Secretary of State State of Illinois

Assigned by Secretary of State

Filing Fee \$75

SUBMIT IN DUPLICATE

CERTIFICATE OF LIMITED PARTNERSHIP (Illinois limited partnership)

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

92543378

OFFICE USE ONLY

6006893 SOSIL 07/23/92 75.00 TO 0000013245 FILED

1. Limited partnership name: Park Place Estates of Northbrook Limited Partnership

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 co are unacceptable). P.O. Box 1700, 1755 Lake Cook Road, Highland Park, Illinois 60035 (Lake County)

3. Federal Employer Identification Number (F.E.I.N.): applied for

4. This certificate of limited partnership is effective on: (Check one) a) X 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: Harold W. Franke Registered Office: 203 N. LaSalle St., Suite 1800 Chicago Cook Illinois 60601

6. The limited partnership's purpose(s) is: real estate development

IRS Industrial Code Number is: 6740 DEPT-01 RECORDING 143333 TRAN 0385 07/24/92 14:32:00 48808 \$ * 92-543378 COOK COUNTY RECORDER \$23.00

7. Dissolution date is: [] Perpetual or December 31, 2012 (month, day, year)

8. The total aggregate dollar amount of cash, property and services contributed by all partners is: (per Section 201-5) \$100,000.00

9. A brief statement of the partners' membership termination and distribution rights: The Partners have no voluntary termination rights. Upon termination of the Partnership, the proceeds of liquidation shall be distributed to and among the Partners in accordance with the terms of the Partnership Agreement which is kept at the principal office of the Partnership:

Handwritten number 2300

Box 416 (LBC)

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DO NOT SEND CASH

FORMS OF PAYMENT:
Payments must be made by certified check, cashier's check, Illinois attorney's check, Illinois O.P.A.'s check or money order, payable to 'Secretary of State.'

RETURN TO:
Secretary of State
Department of Business Services
United Partnership Division
Room 330, Centennial Building
Springfield, Illinois 62768
Telephone: (217) 782-6560

(Signatures must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conforming copies.)

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.

BUSINESS ADDRESS

1. P.O. BOX 1700, 1785 Lake Cook Rd.,

Number

Highland Park

City/Town

Illinois 60035

State ZIP Code

Number

City/Town

State

ZIP Code

Number

City/Town

State

ZIP Code

Number

City/Town

State

ZIP Code

Number

City/Town

State

ZIP Code

Number

City/Town

State

ZIP Code

SIGNATURE AND NAME

(Signature)

Suzann Kojan, President

(Type or print name and title)

Park Place Batches of Northbrook Builders, Inc.
(Name of General Partner if a corporation or other entity)

(Signature)

(Type or print name and title)

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

(Signature)

(Type or print name and title)

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

(Signature)

(Type or print name and title)

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(Type or print name and title)

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