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Form **BCA-5.10**
NFP-105.10

STATEMENT OF CHANGE
OF REGISTERED AGENT
AND/OR REGISTERED OFFICE

92044713

File # D 4994-171-4

(Rev. Jan. 1991)

SUBMIT IN DUPLICATE

George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-6961

This space for use by
Secretary of State

Date 12-13-91

Filing Fee \$ 5

Approved: SK

FILED
1991-12-13
GEORGE H. RYAN
SECRETARY OF STATE

1. CORPORATE NAME: ABILITY FINISHERS, INC.

2. STATE OR COUNTRY OF INCORPORATION: ILLINOIS

3. Name and address of the registered agent and registered office as they appear on the records of the office of the Secretary of State (Before Change):

Registered Agent	<u>C. JACKSON DARNALL</u>
	First Name Middle Name Last Name
Registered Office	<u>10035 W. Grand Ave., 201</u>
	Number Street Suite No. (A P.O. Box alone is not acceptable)
	<u>Franklin Park 60131-2546 Cook</u>
	City Zip Code County

4. Name and address of the registered agent and registered office shall be (After All Changes Herein Reported):

Registered Agent	<u>C. JACKSON DARNALL</u>
	First Name Middle Name Last Name
Registered Office	<u>2121 West Army Trail Road 105</u>
	Number Street Suite No. (A P.O. Box alone is not acceptable)
	<u>Addison 60101 DuPage</u>
	City Zip Code County

5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.

6. The above change was authorized by: ("X" one box only)

- a. 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.

7. (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.

Dated _____ 19____ (Exact Name of Corporation)

attested by _____ by _____
 (Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)

 (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 January 2, 12/3/91 1992 _____
 (Signature of Registered Agent of Record)

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Property of Cook County Clerk's Office

92044713

Mail to
DARNALL, POLACHEK & ASSOCIATES
Suite 105
2121 West Army Trail Road
Addison, Illinois 60101