

UNOFFICIAL COPY

Form **BCA-5.10**
NFP-105.10

STATEMENT OF CHANGE
OF REGISTERED AGENT
AND/OR REGISTERED OFFICE

93693269

File #

SUBMIT IN DUPLICATE

(Rev. Jan. 1991)

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

Remit payment in check or money
order, payable to "Secretary of State."

FILED

GEORGE H. RYAN
SECRETARY OF STATE

This space for use by
Secretary of State

Date 8-20-93

Filing Fee \$5

Approved: [Signature]

- 1. CORPORATE NAME: DECELLE-FAULDS, LTD. DEPT-01 RECORDING \$23.50
166666 TRAN DEPT 08/31/93 1443:00
- 2. STATE OR COUNTRY OF INCORPORATION: Illinois *55391 *93-693269
COOK COUNTY RECORDER

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 JOHN D. FAULDS, JR.
First Name Middle Name Last Name

Registered Office 406 Lathrop
Number Street Suite No. (A P.O. Box alone is not acceptable)

River Forest 60305 Cook
City Zip Code County

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

Registered Agent KEITH GRAY
First Name Middle Name Last Name

Registered Office 8100 N. Austin
Number Street Suite No. (A P.O. Box alone is not acceptable)

Morton Grove 60057 Cook
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 July 9, 1993 DECELLE-FAULDS, LTD.

attested by Michael Gower by [Signature]
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)

MICHAEL GOWER KEITH GRAY
(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.

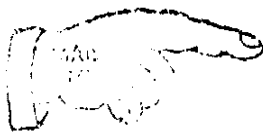
Dated _____ 19____ 23.50
(Signature of Registered Agent of Record)

UNOFFICIAL COPY

NOTES

1. The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2. The registered office must include a street or road address, a post office box number alone is not acceptable.
3. A corporation cannot act as its own registered agent.
4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must then be signed by the President (or vice-president) and by the Secretary (or an assistant secretary).
6. The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent.

C-135 B



James T. Hudson Ltd
111 E. Wacker Dr.
Suite 2921
Chicago, Ill.
60601

62733269

PROPERTY OF COOK COUNTY CLERK'S OFFICE