10
မ္
تين
~₹
~ .
1.5
~
Ğ.
~
_
~
2

Form BCA-5.  NFP-105.	}		CIAL NY OF CHA STERED AG GISTERED (	ENT	937360 File # 05620	
(Aov. Jan. 1991)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	e de la constante de la consta		SUBMIT IN DUPL	.ICATE
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."		OCT 2 8 1992		KAN	This space for use by Secretary of State Date /o. 2 /- > > 5 Filling Fee \$ 5	
		SEC	SECRETARY OF STATE			
1. CORPORATE NAM	NE: AMER	ICAN CAREER DEV	ELOPMENT CENT	er, inc.		mainesse acceptance of the second
2. STATE OR COUN	TRY OF I	NCORPORATION	: ILLINO	IS		
Name and address     of the Secretary of	of the reg State (36	gistered agent and Sore Change):	registered office	as they appo	ear on the records o	of the office
Registered	f	First (\ am)	D . Middle Nam		DREW Last Name	<del>1</del>
Registered	Office	30 NORTH LASALL Number	E, SUITE 2200 Straet		(A P.O. Box alone is not t	acceptable)
		CHICAGO,	60602		COOK	,
4. Name and address	of the regi	<i>city</i> stered agent and re	Zip Code gistered office s	hall be <i>(After</i> .	County All Changes Herein	Reported):
Registered /	_	HILLIAM	C A.		MILLER	
<b>U</b>	F	First Name 212 EAST OHIO S'	<i>Lirija Nam</i> TREET - <i>SUI</i> T	e E 500	Last Name	
Registered (	Office	Number	Stree	<u></u>	(A P.O. Box alone is not a	acceptablo)
		CHICAGO,	600		СООК	
		City	Zip Code		Соипту	
<ol><li>The address of the changed, will be ide</li></ol>		ed office and the a	iddress of the b		FT-01 RECORDING	\$23. 15:23:00
6. The above change, a. 囚 By resolution				(Note 5	FOR 12 4 #-93- COUNTY RECOR	
b.   By action of	•	_		(Note 6	'//	
NOTE: When the regist				President an	d Secretary are req	ulred.
<ol> <li>(If authorized by the The undersigned continued to the Theorem 1)</li> </ol>				anad hu ite du	ulv authorized office	rs each of
whom affirms, under per					my addition280 office	15, 64011 01
DatedSEPTEMBER ]	.8	19, 92	AMERICAN CAL		PMENT CENTER, II	NC.
attested by	X		by	(Exact Vari	of Corporation)	
(Signature of S	ecretary or A	ssistant Secretary)		Signature of Presi	dent or Vice President)	
DENNIS MA	IMONIS or Print Nan	ne and Title)	DENNIS	S MAIMONIS	t Name and Title)	
(If change of registered of The undersigned, un	office by re	egistered agent, si	gn here. See No irms that the fac	ote 6)		
Dated		19				
		- I summinguis	(5	Signature of Regis	elered Agent of Record)	865

## UNOFFICIAL COPY

Stopperty of Coop Colling Clerk

WILLIAM A. MILLERE
212 E. Chis er. Junte 500
Chyo Il Louis

COOOSCASE