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Filing Fee \$5

GEORGE H. RAY
SECRETARY OF STATE
STATE OF ILLINOIS

SUBMIT IN DUPLICATE!

RESIGNATION OF REGISTERED AGENT (Illinois or foreign limited partnership)

All correspondence regarding this filing will be sent to the registered agent of the limited partnership through a self-addressed envelope if furnished.

93209442



OFFICE USE ONLY
S005432 SUSEL 03/12/93
5.00 AA 000004555 FILED

1. Limited partnership's name: Belhaven Associates, Ltd.

2. The address, including county, of the principal office of the limited partnership, as such is known to the registered agent is: (Post office box alone and c/o are unacceptable)

11401 South Oakley Avenue
Chicago, IL 60643 Cook County
DEPT-01 RECORDING #23,511
T46666 TRAN 9312 03/19/93 15:15:00
47698 * 93 207442
COOK COUNTY RECORDER

3. File Number Assigned by the Secretary of State: S005432

4. Federal Employer Identification Number (F.E.I.N.): 36-3331666

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

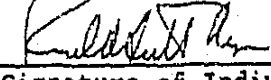

Registered Agent: <u>Ronald Scott Mangum</u>	<u>93209442</u>	
Registered Office: <u>35 East Wacker Drive, Suite 2130</u>		
(P.O. Box alone and c/o are unacceptable)		
Number <u>Chicago, IL 60601</u>	Street <u>Cook County</u>	Suite # <u>Illinois</u>
City	County	Zip Code

6. The registered agent resigns, effective on: 04/15/93, which is not less than 30 days after the date of filing this form. month, day, year

7. A copy of this notice has been sent to the principal office of the limited partnership at least 10 days prior to the date of its filing with the Secretary of State.
 YES date sent: 02/16/93 NO

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

This notice shall be executed by the registered agent, if an individual, or if a corporation, by a principal officer.

 OR 
Signature of Individual Agent Signature of Principal Officer

Ronald Scott Mangum
Name (Print or type) Name & Title (print or type)

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(Signatures must be in ink on an original document. Carbon copy, photo copy 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

Record + Return to:
Mangum, Smietanka + Johnson
Attn: Beth Berz
35 E. Wacker Drive #2130
Chicago, IL 60601

Property of Cook County Clerk's Office

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