95475174 (Rev. Jan. 1995)

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BEPT-01 RECORDING T42222 TRAN 2428 07/20/95 14:33:00 95566 \$ JL #-95-475174 \$23.50

COOK COUNTY RECORDER

NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

The unucrsigned affirms, under penalties of perjury, that the facts stated herein are true.

The original parties of umendment must be signed by a general partner, all new general partners and at least one withdrawing general partner.

m to	···
SIGNATURE AND NAME Signature 7.6	BUSINESS ADDRESS
Signature	Number/Street Sept 70000 Suite 375
Type or print name and title WILLIAM T KING	City/town CHIC430
VICE MESDEST	4
Name of General Partner if a corporation or	7/4
other entity CHS EVANSTON INC.	State /LUNOIS Zip Code 60606
Signature	Number/Stree:
Type or print name and title	City/town
Name of General Partner if a corporation or	
other entity	StateZir Code
Signature	Number/Street
Type or print name and title	City/town
Name of General Partner if a corporation or	
other entity	State Zip Code
(Signatures must be in BLACK INK on an original document	t. Carbon copy, photocopy or rubber stamp signatures may only

FORMS OF PAYMENT:

be used on conformed copies.)

Payment must be made by certified check, enshier's check, Illinois attorney's check, Illinois C.P.A.'s check of money order, payable to "Secretary of State."

DO NOT SEND CASH!

RETURN TO:

Secretary of State Department of Business Services Limited Partnership Division Room 357, Howlett Building Springfield, Illinois 62756 Telephone: (217) 785-8960

UNOFFICIAL COPY

(Rev. Jan. 1995)

Filing Fee \$25

SUBMIT IN DUPLICATE!

All correst on Jence regarding this filting will be sent to the registered agent of the limited partnership unless a self-addressed envelope with pre-paid postage is included.

32735750 TT

GEORGE H. RYAN SECRETARY OF STATE STATE OF ILLINOIS

CERTIFICATE OF AMENDMENT
TO THE
CERTIFICATE OF LIMITED PARTNERSHIP
(Illinois limited partnership)

		madassi.	
1.	Limited	partnership's name: CHS 1839 RAILLOW, ASSOCIATED LIMITED PARTNERSHIP	
2.	File nui	nber assigned by the Secretary of State:	
3.	Federa	Employer Identification Number (F.E.I.N.): 36. 36.56.80.7	
4.	The certificate of limited partnership is amended as follows: (Check all applicable changes) (Address changes P.O. Box alone and c/o are unacceptable)		
re-di	a)	Admission of a new general partner (give name and business address below).	
, 4		Withdrawal of a general partner (give name below).	
475	<u>X</u> c)	Change of registered agent and/or registered agent's office (give new name and address, including county below).	
95	<u> </u>	Change in the address of the office at which the records required by Section 201 of the Act are kept (give new address, including county below).	
	<u>X</u> e)	Change in the general partners name and/or business address (give name and new address below).	
	1)	Change in the partners' total aggregate contribution amount (give new dollar amount below).	
	g)	Change in limited partnership's name (give new name below).	
	h)	Change in date of dissolution (give new date below).	
	i)	Other (give information below). QUESTICNS 4(c) AND 4(d) NICK J. PORCARU SETUS TOWER, SUITE 3NT CHICAZO, COOK, ILCINOIS 60606	
lf a B 1	dditiona /2" x 11	space is needed, it must be continued on the reverse side and/or in the same format on a plain white sheet, which must be stapled to this form.	
CL	P-9.5	SEPALU TOWER SUITE 3W BY	