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SUBMIT IN DUPLICATE!

95672969

DEPT-01 RECORDING \$23.50
T#6666 TRAN 1170 10/04/95 09:28:00
49131 + RC *-95-672969
COOK COUNTY RECORDER

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

GEORGE H. RYAN
SECRETARY OF STATE
STATE OF ILLINOIS

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

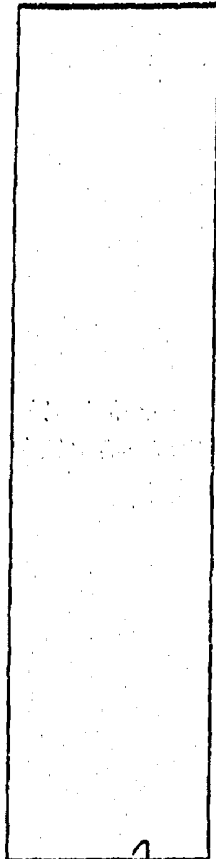
1. Limited partnership's name: The 45 Park Boulevard Limited Partnership
2. File number assigned by the Secretary of State: S003964
3. Federal Employer Identification Number (F.E.I.N.): 36-3079641
4. The certificate of limited partnership is amended as follows:
(Check all applicable changes)
(Address changes P.O. Box alone and c/o are unacceptable)
 - a) Admission of a new general partner (give name and business address below).
 - b) Withdrawal of a general partner (give name below).
 - c) Change of registered agent and/or registered agent's office (give new name and address, including county below).
 - d) 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).
 - e) Change in the general partners name and/or business address (give name and new address below).
 - f) 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).

See Attachment

If additional space is needed, it must be continued on the reverse side and/or in the same format on a plain white 8 1/2" x 11" sheet, which must be stapled to this form.

73.50
BMF

0315880



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

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

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

Signature *Monte C. Strusiner*
SIGNATURE AND NAME
Type or print name and title Monte C. Strusiner,
General Partner

Name of General Partner if a corporation or
other entity N/A

Signature _____

Type or print name and title _____

Name of General Partner if a corporation or
other entity _____

Signature _____

Type or print name and title _____

Name of General Partner if a corporation or
other entity _____

BUSINESS ADDRESS
Number/Street 401 Huehl Road, Suite 1-A

City/town Northbrook

State Illinois Zip Code 60062

Number/Street _____

City/town _____

State _____ Zip Code _____

Number/Street _____

City/town _____

State _____ Zip Code _____

(Signatures must be in BLACK INK on an original document. Carbon copy, photocopy 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 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8980

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3003964 SERIAL 10/03/99
25.00 IN 0000001470 21.15

Property of Cook County Clerk's Office

ATTACHMENT TO CERTIFICATE OF AMENDMENT TO THE CERTIFICATE OF LIMITED PARTNERSHIP

Limited partnership's name: The 45 Park Boulevard Limited Partnership

File Number assigned by the Secretary of State: S003964

4c) Monte Craig Strusiner
401 Huehl Road
Suite 1-A
Cook County
Northbrook, IL 60062

4d) 401 Huehl Road
Suite 1-A
Cook County
Northbrook, IL 60062

4e) Monte C. Strusiner
401 Huehl Road
Suite 1-A
Northbrook, IL 60062

Rick Strusiner
401 Huehl Road
Suite 1-A
Northbrook, IL 60062

95672939

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PLEASE
69672936

RECORD AND RETURN TO:
ALAN J. MORGAN
KANTER & MATTENSON, LTD.
25 E. WASHINGTON ST.
SUITE 1400
CHICAGO, IL 60602