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File # N5679-365-8

Form **BCA-5.10** NFP-105.10

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(Rev. Jan. 1995)

George H. Ryan' Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED **OFFICE** 

£ 1995

GEORGL H. RYAN SECRETARY OF STATE DEPT-01 RECORDING

\$23.50

- T\$2222 TRAN 7107 10/10/95 16:31:00 \$3267 \$ LC \*-95-687980
- - COOK COUNTY RECORDER

## SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date

10-4-85

Filing Fee

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Approved: A

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

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| 1. | - CURPURATE NAME  | Chicago/Midwest      | Chapter of the Tu            | rnaround Management                 |  |
|----|---|----------------------|------------------------------|-------------------------------------|--|
|    |   | Association          |                              | 0                                   |  |
| 2. | STATE OR COUNTRY  | OF INCORPORATION     | : <u>Illinois</u>            | <u>O</u> ,                          |  |
| 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  | Donald               | F.                           | Dvorak                              |  |
|    |   | First Name           | Middle Name                  | Last Name                           |  |
|    | Registered Office   | 1000 Skokie I        | Boulevard 200                |                                     |  |
|    |   | Number Stree         | t Suite No. (A P.O.          | Box alone is not acceptable)        |  |
|    |   | Wilmette             | 60091                        | 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  | Christopher          | J.                           | Horvay                              |  |
|    |   | First Name           | Middle Name                  | Last Name                           |  |
|    | Registered Office   | 55 E. Monroe S       | Street 4100                  |                                     |  |
|    |   | Number Str           | eet Suite No. (A P.O.        | Box alone is not acceptable)        |  |
|    |   | Chicago              | 60603                        | Cook / C                            |  |
|    |   | City                 | Zip Code                     | County                              |  |

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## SECRETARY OF STATE

| 5.       | The address of the registered office and the address of the busines will be identical.  | s office of the registered agent, as changed,               |  |  |  |
|----------|---|---|--|--|--|
| 6.       | The above change was authorized by: ("X" one box only)  |   |  |  |  |
|          | <ul> <li>a. X By resolution duly adopted by the board of directors.</li> </ul>  | (Note 5)  |  |  |  |
|          | b.   By action of the registered agent.   | (Note 6)  |  |  |  |
| NC       | OTE: When the ragistered agent changes, the signatures of both p  | resident and secretary are required.                        |  |  |  |
| 7.       | 7. (If authorized by the board of directors, sign here. See Note 5)   |   |  |  |  |
| wh       | The undersigned corporation has caused this statement to be sig<br>om affirms, under penalties of perjury, that the facts stated herein a   | are true.   |  |  |  |
| <b>~</b> | Chi.cago/Mi   | dwest Chapter of The Turnaround                             |  |  |  |
| Da       | ted <u>September 30 0 19,95 Management</u>  | APROCIATION  (Exact Name of Corporation)                    |  |  |  |
| atte     | ested by (Minterland) from by   | (Signature of Vice President)                               |  |  |  |
|          | (Signature of Secretary or Assistan (Secretary)   |   |  |  |  |
|          | Christopher J. Horvay, Scretary Lawrence  | (Type or Print Name and Title)                              |  |  |  |
|          | (Type or Print Name and Title)  | (Type of Fillit Isaine and Tule)                            |  |  |  |
| Uf d     | change of registered office by registered agent, sign here. See Not   | e 6)  |  |  |  |
| (), (    | The undersigned, under penalties of perjury, affirms the the  | s stated herein are true.                                   |  |  |  |
|          |   |   |  |  |  |
| Dai      | ted19,(Skine  | ire of Registered Agent of Record)                          |  |  |  |
|          | AND AND THE STATE OF THE STATE |   |  |  |  |
|          |   |   |  |  |  |
|          | NOTES   | TS  |  |  |  |
| 1.       | The registered office may, but need not be the same as the principle registered office and the office address of the registered agent may   | pal office of the corporation. However, the ust be the same |  |  |  |
| 2.       | The registered office must include a street or road address; a post   | office box number along is not acceptable.                  |  |  |  |
| ۷,       | The registered office fridst include a stract or road address, a poor   |   |  |  |  |
| 3.       | A corporation cannot act as its own registered agent.   |   |  |  |  |
| GE C     | 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 registered agent. When the agent reports such a change, this state agent.  MAIL TO Chicago, IL 60   | tement must be signed by the registered                     |  |  |  |