FICIAL COPY (Rev. Jan. 1995) Ď. V 19/41/13 Filing Fee \$25 95691705 ij, 3 SUBMIT IN DUPLICATE! 10 90 00 80 DEPT-01 RECORDING 123,50 T\$5555 TRAN 8953 10/11/95 15:10:00 \$1287 1 JJ #--95-691705 COOK COUNTY RECORDER **GEORGE H. RYAN** All correspondence SECRETARY OF STATE regarding this fling will STATE OF ILLINOIS be sent to the registered agent of the limited CERTIFICATE OF AMENDMENT partnership unless a 39% TO THE addressed envelope with CERTIFICATE OF LIMITED PARTNERSHIP pre-paid postage is (Illinois limited partnership) included. Altamira Apartments Partnership Limited partnership's name: File number assigned by the Secretary of State: \_\_\_\_S000313 Federal Employer Identification Number (F.E.I.N.): <u>36-338954</u> The certificate of limited partnership is amended as follows: (Check all applicable changes) 95691705 (Address changes P.O. Box alone and c/o are unacceptable) \_\_\_\_a) Admission of a new general partner (give name and business address beloy!). b) Withdrawal of a general partner (give name below).  $\frac{X}{X}$  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). X e) Change in the general partners name and/or business address (give name and new address below). \_ t) Change in the partners total to contribution amount (give new dollar amount below). and frame and g) Change in limited partnership Phame (give new name below). ...... h) Change in date of dissolution dat**il** below).

c) Two First National Plaza, 20 South Clark St., Suite 2305, Chicago, 1L 60603 Cook

u) (see reverse)

Other (give information below).

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.

## UNOFFICIAL COPY

Form LP 202 (Rev. Jan, 1995)

e) Perk Ridge Equities, Inc. 2860 River Road, Suite 200 Des Plaines, Illinois 60018-6007

## 5. MAME(8) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(8)

The understand 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 Signature AND NAME	Number/Street 2860 River Road, Suite 200
Type or print name and title A. Thomas Frank	
President of Park Ridge Equities, Inc. Name of General Partner if a corporation or	
other entity Park Ridge Equities. Inc.	State Zip Code _60018-60
Signature	Number/Street
The state of the s	
Type or print name and title	City/town
Name of General Partner if a corporation or	0,5
other entity	State Zip Code
Signature	Number/Street
Type or print name and title	City/town
Name of General Partner if a corporation or	*
other entitled	State Zip Code
(Signatures must be in ACK INK on an original docume be used on conformed copies.)	State Zip Code int. Carbon copy, photocopy or rubber stamp signatures may or

## FORMS OF PAYMENT:

Payment must be made by certified check, cashier's check, itilinois 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 62766
Telephone: (217) 785-8950