Form **BCA-5.10** NFP-105.10

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTER OFFICE

95236919

File # D 5163-727-5

(Rev. Jan. 1991)

George H. Ryan Secretary of State Department of Business Services Springfield, IL 62756

SUBMIT IN DUPLICATE

This space for use by

Telephone (217) 782-6961		MAN 20 1990		Filing Fee	<b>\$</b> 5
	t payment in check or money , payable to "Secretary of State."		H. RYAN	Approved:	M
1.	CORPORATE NAME:	SECRETAR A.P.S., INC.	OF STATE		
2.	STATE OR COUNTRY OF	INCORPORATION:	Illinois_	بيسندي ومسمورة سنباب ومواطوي والمسوو الرسون سويريسوم	. Alifonnishin amal-garage anama na e-ry-agasa sanambilga e
3.	Name and address of the re of the Secretary of State /2		istered office as	they appear on the re	ecords of the office
	Registered Agent _	Norman I. Rothe	n ba um		
	negistered Agent _	First Lie se	Middle Name	. rationalest, and materials and a graph of the same displayment and a second	Last Name
	Domintownal Office	55 L. Monroe St	Ste. 4620		
	Registered Office _	Number	Street	Suite No. (A P.O. Box ald	one is not acceptable)
		Chicago	60603	C	ook
	Name and address of the up	City	Zip Code	ha (44a 440h an an	County
4.	Name and address of the registered agent and registered office shall be (After All Changes Herein Reported)				
	MANagistered Agent	David	O.T.	Brown	
	10,11	First Name	Mirkle Name		Last Name
	Resistered Office	200 N. LaSalle St.	, Sce. 2100		
		Number	Number Sirert Suite No. (A P.O. Box alone is n		one is not acceptable)
		Chicago	60601-1095		Cook
	<u></u>	City	Zip Code	/_	County
5.	The address of the registe changed, will be identical.	ered office and the add	ress of the busi	ness office of the re	gistered agent, as
6.	The above change was authorized by: ("X" one box only)				
	a. Ixk By resolution duly adopted by the board of directors. (Note 5)				
	b.   By action of the reg	•		(Note 6)	•
MOT	•	•	tuana od hadis Das		2
	E: When the registered ag			isidem and Secretary	rad reduited.
<b>7</b> .	(If authorized by the board		•		
	The undersigned corporation				ed officers, each o
Who	m affirms, under penalties o	r perjury, that the facts	stated nerein are	e true.	*** ****
Date	ed February 16	19 <u>, 95</u>	A, P,	S INC.	
attes	sted by Ar Chair M	neter 1	tamil v	(Exact Name of Carporatio	
~,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Signature of Secretary of			dure of President or Vice P	ecident)
	JOHN CRAIG MART			P. GONYO, Preside	
		Name and Title)		(Type or Print Name and Tit	

(If change of registered office by registered agent, sign here. See Note 6)

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

Dated \_\_\_\_\_ \_ 19, (Signature of Registered Agent of Record)

Property of Cook County Clerk's Office

\$23.50

T#0003 TRAN 4677 04/10/95 14:15:00

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COGK COUNTY RECORDER

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