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95396598 DEPT-OI RECORDING

\$23.00

File # 5919-927-2

Form BCA-5.10 NFP-105.10

(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

T\$2222 TRAN 1046 06/20/95 11:36:00

THE BUILDING SERVICE THE MEDICAL MICHIGAN CONTRACTOR to symptomic approximation of the second of

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COOK COUNTY RECORDER

JUN 13 1995

GEORGE H. RYAN SECRETARY OF STATE

This space for use by Secretary of State 🕒

Date

Filing Fee

\$5

Approved:

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

Cook

County

| 1. 4 CORPORATE NAME: | Fulton-Carroll Co | enter, Inc. | |
|-----------------------------|-----------------------------------|--|--|
| 2. STATE OR COUNTRY | · | | 0, |
| of the Secretary of Sta | | nd registered office as they appropriete the control of the contro | |
| | rifst Name | Middle Name | Last Name |
| Registered Offi | CO Number Str. Chicago, Illino | get Suite No. (A P.O. Bo | ox alone is not acceptable) Cook |
| ed Billion and address of t | City he registered agent an | Zip Code d registered office shall be (aff | County or all changes herein reported |
| Registered Age | nt Dennis M. Wilso First Name | Middle Name | Last Name |
| Registered Office | ce 77 West Wacker | Drive, Suite 4900 | v alone is not acceptable) |

60601-1693

Zip Code

Chicago, Illinois

City

UNOFFICIAL COPY

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| 5. | The address of the registered office and the addrewill be identical. | ss of the business office of the registe | red agent, as changed, | |
|---|--|---|---|--|
| 6. | The above change was authorized by: ("X" one | box only) | | |
| | a. 🗵 By resolution duly adopted by the board | of directors. (Note 5) | | |
| | b. By action of the registered agent. | (Note 6) | | |
| | | | | |
| NO | TE: When the registered agent changes, the sign | natures of both president and secreta | ary are required. | |
| 7. | (If authorized by the board of directors, sign her | | • | |
| The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of | | | | |
| who | om affirms, under penalties of periury, that the fact | ts stated herein are true. | | |
| Dat | ed 5/25 / 19.95 | Fulton-Carroll Center, Inc. | | |
| Uu. | | (Exact/Name of Corp. | poration) | |
| atte | ested by Juhn LOM/6/Jerica | by Une Loule | | |
| | (Signature of Secretary or Assistant Secre. e.y) | (Signature of Vice Pi | · | |
| | June T. Lavelle Bearse- Secretary | | | |
| | (Type or Print Name and Title) | (Type or Print Name a | and Title) | |
| (If c | change of registered office by registered agent, sig | nn here. See Note 6) | | |
| ţ,. - | The undersigned, under penalties of perjury, affi | rms that the facts stated herein are t | true. | |
| D -4 | 10 | 3 | | |
| Dat | | (Signalitie of Registered Ag | nent of Record) | |
| | | (のかがない きょう いきいうほうせん かい | delli Ol i iccolol | |
| • | Business . | (Signature of neglotered Ag | gem of riccordy | |
| , | Material Control | (Signature of Registered Ag | | |
| , | • | OTES | 95396598 | |
| 1. | • | OTES ame as the principal office of the corr | 95396598 | |
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| 1. | The registered office may, but need not be the sa registered office and the office address of the registered office must include a street or road. A corporation cannot act as its own registered ago. If the registered office is changed from one county of deeds of the new county a certified copy of the same county as a certified copy of the same county as certified copy of the county as certified copy of the same county as certified copy of the certified c | OTES Ime as the principal office of the corr gistered agent must be the same. I address; a post office box number a gent. I to another, then the corporation must circles of incorporation and a certified | 95396598 Foration. However, the lone is not acceptable. st file with the recorder topy of the statement | |
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