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(Rev. Jan. 1995)

Filing Fee \$25

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SUBMIT IN DUPLICATE!

\$05IL 06/03/96 FF 0000092309 FILED

DEPT-01 RECORDING 147777 TRAN 4161 06/11/96 11:27:00 +0221 + JL +-96-444049 COOK COUNTY RECORDER

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a seitaddressed 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: Roosevelt Glen Corporate Center Investment Company		
2.	File number assigned by the Secretary of State: S 0012(11)			
3.	Federal Employer Identification Number (F.E.I.N.): 99-0253689			
4.	(Check	rtificate of limited partnership is amended as follows: all applicable changes) ss changes P.O. Box alone and c/o are unacceptable) 96444()49		
	Admission of a new general partner (give name and business address below).			
	b)	Withdrawal of a general partner (give name below).		
	<u>X</u> 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). MAIL BF KP 333 W. Wecker Dr. 270.		

Chicago, 12 60606 If additional space is needed, it must be continued on the reverse side and/or in the same format on a plain white U 8 1/2" x 11" sheet, which must be stapled to this form.

Form Lega NOFFICIAL COPY (Rev. Jan. 1995)

c) Old Information Howard A. Nagelberg 444 North Michigan Avenue Suite 2500 Chicago, Illinois 60611

New Information Howard A. Nagelberg 333 West Wacker Drive Suite 2700 Chicago, Illinois 60606

25.00 FF 0000092308

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

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

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

\$6444049

Signature Signature AND NAME	Number/Street 150 N. Wa	ADDRESS acker Dr., 16th Flr.
Type or print name and title Michael T. Tomasz, Pres	\mathcal{T}_{α}	
Tomasz/Shidler Investment Corporation		
Name of General Partner if a corporation or other entity	State Illinois	Zip Code 60606
Signature	Number/Street	
Type or print name and title	City/town	76,
Name of General Partner if a corporation or		5
other entity	State	Zip Code
Signature	Number/Street	
Type or print name and title	City/town	0
Name of General Partner if a corporation or		
other entity	State	Zip Code
(Signatures must be in BLACK INK on an original document, be used on conformed copies.)	Carbon copy, photocopy or rub	ber stamp signatures may only

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) 785-8960