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File # D5814 5874

Form BCA-5.10 NFP-105.10

(Rev. April 1995)

George H. Ryan Secretary of State Department of Business Springfield, IL 62756 Telephone (217) 782-3647 http://www.sos.state.il.us

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

NOV 14 1996

GEORGE H. RYAN SECRETARY OF STATE SUBMIT IN DUPLICATE

DEPT-01 RECORDING

2961 + KB *-96. COOK COUNTY RECORDER

\$2222 TRAN 9591 12/06/96 12:01:00 \$2961 \$ KB *-96-924004

This space for use by Secretary of State

Date 11.14.96

Filing Fee

Approved: 18

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

Type or brint in black intronly. See reverse side for signature(s

							فيلو
1.	CORPORATE NAME:		~	~	ancial Servi	ces, Inc	<u>•</u>
2.	STATE OR COUNTRY OF	F INCORPO	RATION:	Illinois	— O _x		
3.	Name and address of the of the Secretary of State (before chang	ge) ;		hey appear on the n	9	office
	Registered Agent -	First Name	Maurice	Middle Name	L L	ast Name	HEV
	Registered Office	1025	162nd	ST No. 10	CO Poy alman in not	t anaontoblo)	
	_	Number, South	Street Holland	Suite No. (A 60473	P.O. Box alone is not		
		City		ZIP Code		County	***
4.	Name and address of the r	egiştered ag	ent and regist	ered office shall	be (after all change	s herein repo	rted):
	Registered Agent _	James First Name		A, Middle Name	<u> </u>	COO 7	<u></u>
	Registered Office _	1025	16214	St.			/
		Number DUT/1	Street Holland	Suite No. (A 60473	P.O. Box alone is not	acceptable) /	
		City		ZIP Code	1.00	County 12	5/6

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5.	The address of the registered office and the address of the busin will be identical.	ess office of the registered 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 signatures of both	n president and secretary are required.				
7.	(If authorized by 'ne board of directors, sign here. See Note 5.) The undersigned corporation has caused this statement to be a maffirms, under penalties of perjury, that the facts stated herei	signed by its duly authorized officers, each of				
Ϋ́						
Date	ad DCTODET / 19, 70 MIXINES	+ Mortgage & Financial Service (Exact Marke of Oproporation)				
atte	sted by X (tan	200 X //// Att 8				
·)	(Signature of Secretary or Assistar (Secretary)	gnatule of President or Vice President)				
	<u>James</u>	s A. Wood, President				
	(Type or Print Name and Title)	(Type or Print Name and Title)				
(If o	hange of registered office by registered agent, sign here. See N The undersigned, under penalties of perjury, affirms that the fa	lote 6) ots stated herein are true.				
Date	od19,	mature of Registered Agent of Record)				
***	NOTES	4				
1.	The registered office may, but need not be the same as the prir registered office and the office address of the registered agent	ncipal office of the corporation. However, the must be the same.				
2.	The registered office must include a street or road address; a po	st office box number zione is not acceptable.				
3.	A corporation cannot act as its own registered agent.					
4.	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.					
00	Any change of registered agent must be by resolution adopted be then be signed by the president (or vice-president) and by the s	y the board of directors. This statement must secretary (or an assistant secretary).				
26.35.40 PM	The registered agent may report a change of the registered off registered agent. When the agent reports such a change, this agent.	statement must be signed by the registered				
	James Wood So 3332 Curadio Olympia Fred	Dr millel				
C-135.1	20332 Citade	5, ll bore				
	Oughur					