

# UNOFFICIAL COPY

Form LP 202  
(Rev. Jan. 1995)

Filing Fee \$25

96224598

SUBMIT IN DUPLICATE!

DEPT-01 RECORDING \$23.50  
TRAN 3653 03/25/96 12:49:00  
\$6645 # BJ \*-96-224598  
COOK COUNTY RECORDER

COOK COUNTY RECORDER  
25.00 FR 0000088113 FILED

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed 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)

- Limited partnership's name: CALAVERA HILLS DEVELOPMENT LIMITED PARTNERSHIP
- File number assigned by the Secretary of State: 0001345
- Federal Employer Identification Number (F.E.I.N.): 36-3570591

4. The certificate of limited partnership is amended as follows:  
(Check all applicable changes)  
(Address changes P.O. Box alone and c/o are unacceptable)

96224598

- a) Admission of a new general partner (give name and business address below).
- b) Withdrawal of a general partner (give name below).
- 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).



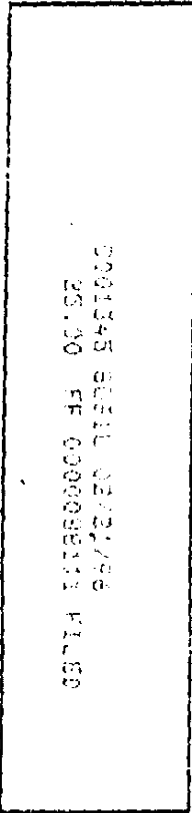
New Registered Agent: Vytas P. Ambutas, 1965 Pratt Blvd., Elk Grove Village,  
Cook County, IL 60007

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.

2350

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

The undersigned 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 AND NAME

#### BUSINESS ADDRESS

Signature [Handwritten Signature]

Number/Street 1965 Pratt Blvd.

Type or print name and title Vytas Ambutas, Asst. Sec.

City/Town Elk Grove Village, IL 60007

Calavera Holding, Inc.

Name of General Partner if a corporation or

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 entity \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_

Number/Street \_\_\_\_\_

Type or print name and title \_\_\_\_\_

City/Town \_\_\_\_\_

Name of General Partner if a corporation or

other entity \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

(Signatures must be in **BLACK INK** on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

#### 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."

#### RETURN TO:

Secretary of State  
Department of Business Services  
Limited Partnership Division  
Room 357, Howlett Building  
Springfield, Illinois 62756  
Telephone: (217) 785-8960

**DO NOT SEND CASH!**

SECRET