

UNOFFICIAL COPY

Form LP 201
(Rev. Jan. 1995)

Filing Fee \$25

SUBMIT IN DUPLICATE!

96264481

DEPT-01 RECORDING \$23.50
T#7777 TRAN 0696 04/09/96 11:39:00
#5062 # SK #-96-264481
COOK COUNTY RECORDER

5009365 REGISTRATION
25.00 FF 0000089225 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: Sohl Family Limited Partnership
- File number assigned by the Secretary of State: 5009365
- Federal Employer Identification Number (F.E.I.N.): 36-4002094
- The certificate of limited partnership is amended as follows:
(Check all applicable changes)
(Address changes P.O. Box alone and c/o are unacceptable)
 - 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).

SEE REVERSE FOR ADDITIONAL INFORMATION

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.

CLP-9.5 Auto Driveway Co.
310 S. Michigan Ave
CHICAGO, IL 60604
ATTN: JOHN F. SOHL

\$23.50
gHC

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Registered Agent, and Address:

1
pur Lane
IL 60429

the aggregate contribution amount:

BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

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

of amendment must be signed by a general partner, all new general partners and
existing general partner.

Bohler
Bohler, General
Partner

BUSINESS ADDRESS
Number/Street 310 S Michigan Ave
City/town Chicago

State Ill Zip Code 60604

Number/Street _____
City/town _____

State _____ Zip Code _____

Number/Street _____
City/town _____

State _____ Zip Code _____

Original document. Carbon copy, photocopy or rubber stamp signatures may only

RETURN TO:
Secretary of State
Department of Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-6960

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