UNOFFICIAL COPY

97523223 Form BCA-5.10 DEPT-01 RECORDING \$23,00 NFP-105.10 T#0014 TRAN 3598 07/21/97 09:44:00 49102 4 JW *-97-523223 (Rev. April 1995) COOK COUNTY RECORDER George H. Ryan Secretary of State Department of Business Selvices Springfield, IL 62756 SUBMIT IN DUPLICATE Telephone (217) 782-3647 http://www.sos.state.it.us This space for use by Secretary of State Date STATEMENT OF CHANGE Filma Fee TUL 09 1997 OF REGISTERED AGENT Approved: GEORGE H. RYAN AND/OR REGISTERED SECRETARY OF STATE Remit payment in check or money order, **OFFICE** payable to "Secretary of State." Type or print in black inkered See reverse side for signaturely CORPORATE NAME: relaware STATE OR COUNTRY OF INCORPORATION: -Name and address of the registered agent and registered office as they appear on the records of the office of the Secretary of State (before change): Registered Agent -First Name Middle Name Last Name 8725 gains MOAD Registered Office -Street Suite No. (A P.O. Box alone is not acceptable) Number County Name and address of the registered agent and registered office shall be (after all changes herein reported):

Registered Agent
First Name

Middle Name

Last Name

Registered Office

Number

Street

Suite No. (A F.O. Box alone is not acceptable)

Chiqqo, IL 60638

City

ZIP Code

County

JNOFFICIAL CO

		he address ill be identic		istered offic	e and the ad	dress of the	business	office of the register	ed agent, as ch	anged,
	6. T	he above cl	hange wa	as authorize	id by: ("*/" o	ne box only) .	•		
:	a.	, X By re	solution o	duly adopted	d by the boa	ird of direct	ors.	(Note 5)		
,	b.	. 🗍 By ac	tion of th	e registered	d agent.	·		(Note 6)		
	•				3					
	NOTE:	: When the	re lister	ed agent ch	anges, the	signatures o	of both pr	esident and secrete	ary are required	j,
		Annual Control of the			ectors, sign	·				- 4
1	T I	he undersig	ned com	cration has		statement t	o be sign	ied by its duly authore true.	rized officers,	each of
			, po, a.	nor er penja					e Legisland	
	Dated	101	1/3		19. <u>97</u>	DOWN	YORK	ENLET Prise	3 LTO	
			ر مر		X			(Exact Napropi Corp	oration)	•
ار دنور	atteste	d by		otoni or Assi	stent Secreta	ini by		ture of President or V	/Ice President)	
	no de la companya de				BID'II OHUBIC	· ////////////////////////////////////	,			, .
,		VALL		CHELSKY			ENRY	Koschitze	V	 `
		1	Type or F	rint Name al	nd Title)		(Type or Print Name a	nd Title)	
	(If char	nge of regis	tered offi	ce by reals!	tered agent,	slum here.	See Note	(6)		
	TI	ne undersig	ned, und	er penalties	of perjury,	affirms that	the facts	stated herein are ti	ue.	4 1
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	Dated				[19,			ture of Registered Ag	ant of Basard)	7 (1)
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1.					į		.•.	0/1	· · · · · · · · · · · · · · · · · · ·	
	NO NO				NOTES		1/1			
	1. Th	ne registere gistered off	d office n	nay, but nee ne office ad	ed not be the dress of the	same as the	ne princip agent mu	al office of the corp ist be the same	oration. Howev	er, the
:	2. Th	ne registere	d office m	ust include	a ştreet or ro	oad address	a post o	ffice box number a	one is not acce	ptable.
	з. А	corporation	cannot a	ict as its ow	n registered	agent.			-0)	

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.

Any change of registered agent must be by resolution adopted by the board of directors. This statement must

The registered agent may report alchange of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered

then be signed by the president (of vice-president) and by the secretary (or an assistant secretary).

agent.