

# UNOFFICIAL COPY

Form LP 202  
(Rev. Jan. 1995)

97000718

Filing Fee \$25

SUBMIT IN DUPLICATE!

DEPT-01 RECORDING \$23.00  
T#0009 TRAM 6407 01/02/97 14:42:00  
\$6909 \$ SK #--97-000718  
COOK COUNTY RECORDER

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)

1. Limited partnership's name: Schaumburg Tech (IL) Limited Partnership
2. File number assigned by the Secretary of State: 0009947 23.00
3. Federal Employer Identification Number (F.E.I.N.): 36-3403426 18
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)
  - 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).

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.

Box 309

97000718

0003947 808IL 12/27/96  
25.00 FF 0000100690 FILED

D. Office of Records

7303 N. Cicero Avenue  
Lincolnwood, IL 60646  
Cook

E. New Address of General Partner

7303 N. Cicero Avenue  
Lincolnwood, IL 60646  
Cook

S. 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 X 

Number/Street 7303 N. Cicero Avenue

Type or print name and title Ronald F. Siegel  
Secretary

City/town Lincolnwood

Name of General Partner if a corporation or  
other entity Alter Design Builders, Inc.

State IL Zip Code 60646

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) 785-8660

**DO NOT SEND CASH!**