

# UNOFFICIAL COPY

Form LP 202  
(Rev. Jan 1995)

Filing Fee \$25

97023431

SUBMIT IN DUPLICATE:

DEPT OF REVENUE \$25.00  
FBI REC FROM DEPT 01/10/97 12:34:01  
FBI DC # -97-023431  
DOJ COUNTY REC-DEPT

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: Artist in Residence II Limited Partnership
2. File number assigned by the Secretary of State: 0006241
3. Federal Employer Identification Number (F.E.I.N.): 36-3759835
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).

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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.

23.50  
I.K.

# UNOFFICIAL COPY

Form LP-102  
(Rev. Jan. 1995)

per C.Z.  
by  
B.W.

Information concerning 4(a)

New General Partner: Rosemary O'Callaghan  
c/o Artist in Residence  
6165 N. Winthrop, Chicago, IL 60660

Information concerning 4(b)

General Partner Jack O'Callaghan is deceased,  
as of 9/17/96

0006211 5051 12/04/96  
25.00 LP 000099700 FILED

## 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 now general partners and at least one withdrawing general partner.

### SIGNATURE AND NAME

### BUSINESS ADDRESS

Signature Rosemary O'Callaghan Number/Street Artist in Residence  
6165 N. Winthrop  
Type or print name and title Rosemary O'Callaghan City/Town Chicago  
Executor of the Estate of Jack O'Callaghan, dec'd

Name of General Partner if a corporation or other entity \_\_\_\_\_ State IL. Zip Code 60660

Signature Rosemary O'Callaghan Number/Street Artist in Residence  
6165 N. Winthrop  
Type or print name and title General Partner City/Town Chicago

Rosemary O'Callaghan  
Name of General Partner if a corporation or other entity \_\_\_\_\_ State IL. Zip Code 60660

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 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."

**DO NOT SEND CASH!**

### RETURN TO:

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

Return to:  
Charlotte  
ZIPORYN  
1324 W. AUBURN  
CHICAGO,  
IL 60628