File # D 5796-051-5

Form **BCA-5.10** NFP-105.10

(Rev. April 1995)

George H. Ryan Secretary of State Department of Business Schools Springfield, IL 62756 Telephone (217) 782-3647

STATEMENT OF CHANGE OF REGISTERED AGENT **AND/OR REGISTERED** OFFICE

JAN 29 1997

GEORGE H. RYAN SECRETARY OF STATE DEPT-01 RECORDING

\$23.00

- T#0003 TRAN 3442 02/06/97 12:09:00
- 44785 + YP #-97-086954
 - COOK COUNTY RECORDER

Oate

Approved:

Remit payment in check or money order. psyable to "Secretary of State."

OMBRESS 4

| | | | | | 370300 | |
|--|--|---|---|--|---|--|
| CORPORATE NAME: | Hali | Fax Builder | s, Inc. | 0 | | |
| | NCORPOR | ATION: | ILLINOIS | TŚ | | |
| Name and address of the of the Secretary of State (| registered age before change | nt and registe): | ered office as th | ey appear on | tip records of the office | |
| Registered Agent. | Harold | | s. | | D етро | |
| riegistereu rigem | First Name | | Middle Name | | Last Name | |
| Registered Office - | 200 North | h LaSalle | | | | |
| | Number | Street | Suite No. (A | P.O. Box aloriu | is not suceptable) | |
| _ | Chicago. | Illinois | 6060:-109 | 27 | Cook | |
| | City | | Zia Code | | County | |
| Name and address of the registered agent and registered office shall to (after all changes herein reported). | | | | | | |
| Registered Agent | Harold | | <u>s.</u> | <u>De</u> | mbo | |
| | First Name | | Middle Name | | Last Name | |
| Registered Office | 333 West | Wacker D | rive. Suite | 1800 | | |
| | Number | Street | Suite No. (A | P.O. Box alone | is not acceptable) | |
| | Chicago. | Illinois | 60606 | | Cook | |
| • | City | | Zip Code | | County | |
| | Name and address of the of the Secretary of State (in Registered Agent - Registered Office - Name and address of the Registered Agent - Registered - Regis | STATE OR COUNTRY OF INCORPORATE Name and address of the registered age of the Secretary of State (before change) Registered Agent Harold First Name Registered Office 200 North Number Chicago City Name and address of the registered age Registered Agent Harold First Name Registered Office 333 Nest Number Chicago, Chicago, | STATE OR COUNTRY OF INCORPORATION: Name and address of the registered agent and registred of the Secretary of State (before change): Registered Agent Harold First Name Registered Office 200 North LaSalle Number Street Chicago, Illinois City Name and address of the registered agent and registred Agent Harold First Name Registered Agent Harold First Name Registered Office 333 Nest Wacker I Number Street Chicago, Illinois | Name and address of the registered agent and registered office as the of the Secretary of State (before change): Registered Agent Harold S. Registered Office 200 North LaSalle Street. So Number Street Suite No. (All Chicago, Illinois 6060:-105 City Zip Code Name and address of the registered agent and registered office shall Registered Agent Harold S. Registered Agent Harold S. First Name Middle Name Registered Agent Harold S. First Name Middle Name Registered Office 333 Nest Macker Drive, Suite No. (All Chicago, Illinois 60606 | STATE OR COUNTRY OF INCORPORATION: Name and address of the registered agent and registered office as they appear on of the Secretary of State (before change): Registered Agent Harold First Name Registered Office 200 North LaSalle Street. Suite 2300 Number Street Suite No. (A P.O. Box alone) Chicago. Illinois 6060:-1097 City Zip Code Name and address of the registered agent and registered office shall to (after all city) Registered Agent Harold First Name Middle Name Registered Office 333 Mest Macker Drive. Suite 1800 Number Street Suite No. (A P.O. Box alone) Chicago, Illinois 60606 | |

BOX 340 23 P

UNOFFICIAL COPY

| 5. | Theidress of the registered office and the address of will be identical. | the business office of the registered agent, as changed, | | | |
|------------|--|--|--|--|--|
| 6. | . The above change was authorized by: ("X" one box | only) | | | |
| •• | a. By resolution duly adopted by the board of dir | - ' | | | |
| | b. By action of the renistered agent. | (Note 6) | | | |
| | | | | | |
| M | OTE: When the registered agent changes, the signature | es of both president and secretary are required. | | | |
| 7 . | | · · · · · · · · · · · · · · · · · · · | | | |
| | The undersigned conversion has caused this statement from affirms, under penaltice of partury, that the facts statement is the facts of partury. | ent to be signed by its duly authorized officers, each of | | | |
| W | india and india pendate o conjury, that the facts sta | ((out increase and the control | | | |
| De | ated19, | March March Change (Consumble) | | | |
| -44 | tested by by | (Exact Name of Corporation) | | | |
| =13 | tested by (Signature of Secretary or Assistant Secretary) | (Signature of President or Vice President) | | | |
| | | | | | |
| | (Type or Print Name and Title) | (Type or Print Name and Title) | | | |
| | thenge of registered office by registered agent, sign has the undersigned, under penalties of perjury, affirms that | the facts stated herein are true. | | | |
| | NOTE | (Sirguire of Registered Agent of Record) | | | |
| 1. | | s the principal office of the corporation. However, the | | | |
| 2. | The registered office inust include a street or road address; a post office box number along is not acceptable. | | | | |
| 1 | A corporation cannot act as its own registered agent. | orporation cannot act as its own registered agent. | | | |
| かららいて | If the registered office is changed from one county to an of deeds of the new county a certified copy of the article of change of registered office. Such certified copies may be compared to the certified copies of the cert | s of incomporation and a certified copy of the statement | | | |
| 5. | Any change of registered egent must be by resolution adopted by the board of directors. This statement must then be signed by the president (or vice-president) and by the secretary (or an assistant secretary). | | | | |
| 5 . | The registered agent may report a change of the registered agent. When the agent reports such a cha | stered office of the corporation for which he or she is nge, this statement must be signed by the registered | | | |

agent.