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Form LP 202
(Rev. Jan. 1995)

Filing Fee \$25

97104616

SUBMIT IN DUPLICATE!

DEPT-01 RECORDING \$25.00
142222 TRAN 3003 02/13/97 16:32:00
18723 KE *97-104616
COOK COUNTY RECORDER

DEPT-01 RECORDING \$2.00
142222 TRAN 3003 02/13/97 16:33:00
18723 KE *97-104616
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)

- Limited partnership's name: ESH LANDWEHR LIMITED PARTNERSHIP
- File number assigned by the Secretary of State: CO07098
- Federal Employer Identification Number (F.E.I.N.): 36-3141100
- The certificate of limited partnership is amended as follows:
(Check all applicable changes)
(Address changes P.O. Box alone and c/o are unacceptable)
 - Admission of a new general partner (give name and business address below).
 - Withdrawal of a general partner (give name below).
 - Change of registered agent and/or registered agent's office (give new name and address, including county below). See Exhibit "A" attached.
 - 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).
 - Change in the general partners name and/or business address (give name and new address below).
 - Change in the partners' total aggregate contribution amount (give new dollar amount below).
 - Change in limited partnership's name (give new name below).
 - Change in date of dissolution (give new date below).
 - Other (give information below).

If additional space is needed, it must be continued on the reverse side and/or in this space hereon in a plain white 8 1/2" x 11" sheet, which must be stapled to this form.

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0007098 SOSIL 12/02/96
25.00 PE 00000099872 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 new general partners and at least one withdrawing general partner.

SIGNATURE AND NAME		BUSINESS ADDRESS	
Signature 	Number/Street	3184 MacArthur Blvd.	
Type or print name and title <u>Edward Hadesman</u>	City/Town	<u>Northbrook</u>	
<u>General Partner</u>			
Name of General Partner if a corporation or other entity _____	State	<u>IL</u>	Zip Code <u>60062</u>
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."

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) 785-8360

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EXHIBIT A

Number 5 of the Certificate of Limited Partnership is amended to change the registered agent and registered office as follows:

David T. Brown
200 North LaSalle Street, Suite 2100
Chicago, Illinois 60601
Cook County

Property of Cook County
CLAL
RETURN TO:
Mucke, Ernst, Freed, Denenberg, Ament & Eiger, P.C.
200 North LaSalle Street - Suite 2100
Chicago, Illinois 60601-1095
CLAL
S Office

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11/12/96 11:31:12 AM
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