

File # NS100-157-5

Form **BCA-5.10**  
**NFP-105.10**

(Rev. April 1995)

George H. Ryan  
Secretary of State  
Department of Business Services  
Springfield, IL 62756  
Telephone (217) 782-3647  
http://www.sos.state.il.us

**FILED**

DEC 12 1997

GEORGE H. RYAN  
SECRETARY OF STATE

SUBMIT IN DUPLICATE

This space for use by  
Secretary of State

Date 12-12-97

Filing Fee \$5

Approved: 

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

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

Type or print in black ink only.  
See reverse side for signature (s)

118

1. CORPORATE NAME: Clarotian Medical Center of South Chicago, Inc.

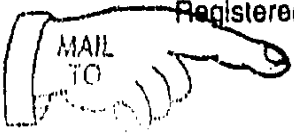
2. STATE OR COUNTRY OF INCORPORATION: Illinois

3. 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):

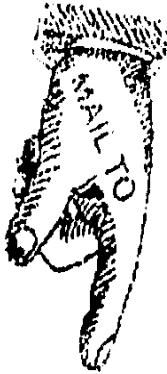
Registered Agent	Ramona		Lopez
	First Name	Middle Name	Last Name
Registered Office	2945 E. 91st Street		
	Number	Street	Suite No. (A P.O. Box alone is not acceptable)
	Chicago		60617
	City	ZIP Code	Cook County

4. Name and address of the registered agent and registered office shall be (after all changes herein reported): <sup>54</sup>

Registered Agent	Ramona		Lopez
	First Name	Middle Name	Last Name
Registered Office	9119 S. Exchange Avenue		
	Number	Street	Suite No. (A P.O. Box alone is not acceptable)
	Chicago		60617
	City	ZIP Code	Cook County



54  
22  
NY  
S22



No. 8489 D.

TWO YEAR  
DELINQUENT SALE

DAVID D. ORR  
County Clerk of Cook County Illinois

TO

This instrument was prepared by and

Mail To: Timothy V. Balin  
Balin, Smith & Assoc., Ltd  
100 N. LaSalle Suite 1111  
Chicago, IL 60602  
(312) 375-1111  
Firm #30177

Property of Cook County Clerk's Office

File # NS100-1575

Form BCA-5.10  
NFP-105.10

(Rev. April 1995)

George H. Ryan  
Secretary of State  
Department of Business Services  
Springfield, IL 62756  
Telephone (217) 782-3647  
http://www.sos.state.il.us

SUBMIT IN DUPLICATE

This space for use by  
Secretary of State

Date 12-17-97

Filing Fee \$ 5

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Remit payment in check or money order,  
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FILED

DEC 12 1997

GEORGE H. RYAN  
SECRETARY OF STATE

STATEMENT OF  
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1. CORPORATE NAME: Clarecian Medical Center of South Chicago, Inc.

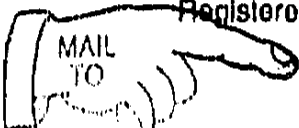
2. STATE OR COUNTRY OF INCORPORATION: Illinois

3. 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	<u>Ramona</u>	<u>Lopez</u>
	<i>First Name</i>	<i>Last Name</i>
Registered Office	<u>2945 E. 91st Street</u>	
	<i>Number</i>	<i>Street</i>
	<u>Chicago</u>	<u>60617</u>
	<i>City</i>	<i>ZIP Code</i>
		<u>Cook</u>
		<i>County</i>

4. Name and address of the registered agent and registered office shall be (after all changes herein reported):

Registered Agent	<u>Ramona</u>	<u>Lopez</u>
	<i>First Name</i>	<i>Last Name</i>
Registered Office	<u>9119 S. Exchange Avenue</u>	
	<i>Number</i>	<i>Street</i>
	<u>Chicago</u>	<u>60617</u>
	<i>City</i>	<i>ZIP Code</i>
		<u>Cook</u>
		<i>County</i>



54  
P2  
M4  
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5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
6. The above change was authorized by: ("X" one box only)
  - a.  By resolution duly adopted by the board of directors. (Note 5)
  - b.  By action of the registered agent. (Note 6)

**NOTE:** When the registered agent changes, the signatures of both president and secretary are required.

7. (If authorized by the board of directors, sign here. See Note 5)

The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true.

Dated \_\_\_\_\_, 19, \_\_\_\_\_  
(Exact Name of Corporation).

attested by \_\_\_\_\_ 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)

(If change of registered office by registered agent, sign here. See Note 6)

The undersigned, under penalties of perjury, affirms that the facts stated herein are true.

Dated September 5, 19, 97 *Bertha Lee*  
(Signature of Registered Agent of Record)

Dated October 30, 19, 97 *Robert E. Seale*  
Chairman, Board of Directors

**NOTES**

1. The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2. The registered office must include a street or road address; a post office box number alone is not acceptable.
3. A corporation cannot act as its own registered agent.
4. 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.
5. Any change of *registered agent* 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).
6. The registered agent may report a change 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 agent.