

Filing Fee \$25

SUBMIT IN DUPLICATE!

File # S013643

Assigned by
Secretary of State

COOK COUNTY
RECORDER
JESSE WHITE
BRIDGEVIEW OFFICE

S013643 SOSIL 01/16/98
25.00 CO 0000116586 FILED

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 TO BE GOVERNED
(Pre-existing Illinois limited partnership)
Prior to 7-1-87

FORM LP 1110 MUST ACCOMPANY THIS CERTIFICATE AND IS A PART OF THIS APPLICATION.

- Limited partnership's name: Longwood Towers Limited Partnership
 - The address, including county, of the office at which records required by Section 104 are to be kept is: (P.O. Box alone & c/o are unacceptable): 10032 South Kedzie Avenue, Evergreen Park, Illinois 60805 (Cook County)
 - Federal Employer Identification Number (F.E.I.N.): 36-3104847
 - The limited partnership's registered agent's name and registered office address is:
Registered agent:
First name Michael Middle name S. Last name Marous
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 116 Street South Prospect Suite # 200
City Park Ridge County Cook State Illinois Zip Code 60068
 - The limited partnership's purpose(s) is: To buy, sell, operate and manage investment real estate.
- IRS Business Code Number is: 6511
- Dissolution date: Perpetual or _____ (month, day, year)
 - The county in which the pre-existing limited partnership's original certificate of limited partnership was filed is: Cook Recording date: May 11, 1981 Document of Book & Page No.: 25865880

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8. The total aggregate dollar amount of cash, property, and services contributed by all partners is:
(per Section 201-5) \$593,880.40

9. A brief statement of the partners' membership termination and distribution rights:
Prorated based upon contribution

NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S)

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

All general partners are required to sign the certificate to be governed.

SIGNATURE AND NAME

BUSINESS ADDRESS

Signature [Signature]

Number/Street 116 S. Prospect

Type or print name and title Michael S. Malrous
General Partner

City/Town Suite 200
Park Ridge

Name of General Partner if a corporation or
other entity _____

State IL Zip Code 60068

Signature [Signature]

Number/Street 10032 South Kedzie Ave.

Type or print name and title Gerald A. Prendergast
General Partner

City/Town Evergreen Park

Name of General Partner if a corporation or
other entity _____

State IL Zip Code 60805

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!

C LP-7.6

RETURN TO:

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

Gerald Prendergast
10032 S. KEDZIE
EVERGREEN PARK IL
60805

