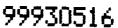
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Form **BCA-5.10** NFP-105.10

(Rev. Jan. 1999)

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

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



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Cook County Recorder



SEP 1 3 1999

JESSE WHITE SECRETARY OF STATE SUBMIT IN DUPLICATE

This space for use by Secretary of State

SEP 13 1999 Date

10.

Filing Fee

**S** 5

Approved:

MKT

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

Type or print in black prik only. See reverse side for sign tare(s)

|    |                                   | - 6             | Carparatum file tt |
|----|-----------------------------------|-----------------|--------------------|
| 1  | CORPORATE NAME: Robert P.         | Gordon, Min Sc. | D5125-0124         |
| •  | OOM ONATE TYANIE.                 |                 | 1                  |
| 2. | STATE OR COUNTRY OF INCORPORATION | 1: Illinois     | <u> </u>           |

| 3. | Name and address of the   | e registered agent | and registered of | ffice as they appo | ear on the records of the off | ICE |
|----|---------------------------|--------------------|-------------------|--------------------|-------------------------------|-----|
|    | of the Secretary of State |                    | <b>~</b> .        |                    | 0                             |     |
|    | Registered Agent          | Robert             | Peter             | Gord               | on .                          |     |
|    | riogiotoroa rigoni        | First Name         | Middle            | Name               | Last Name                     |     |
|    | Registered Office         | IGA NI M           | 11chigan          | Ave                |                               |     |
|    | . logiciorou omios        |                    | Street Su         | ite No. (A P.O. Bo | k alone is not acceptable)    |     |
|    |                           | Chicaco            | 606               | 01                 | Cook                          |     |
|    |                           | City (             | ZIP (             | Code               | County                        |     |

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

Robert Peter Gordon Registered Agent First Name Last Name Middle Name S. Michigan #1300 122

Registered Office Suite No. (A P.O. Box alone is not acceptable) Street Number

Cook Chicag 60603 ZIP Code County

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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.    | 6. The above change was authorized by: ("X" one box only)  |  |  |  |
|       | a.   By resolution duly adopted by the board of directors.   | (Notë 5)                                 |  |  |
|       | b: By action of the registered agent.  | (Note 6)                                 |  |  |
| NO    | NOTE: When the registered agent changes, the signatures of both presid   | ent and secretary are required.          |  |  |
| 7.    |  | by its duly authorized officers, each of |  |  |
| Date  | Dated,   |  |  |  |
| atte  | attested by FPFI 6 938 by  | ct Name of Corporation)                  |  |  |
| \$    | (Signature of Secretary or Assistant Secretary) (Signature   | of President or Vice President)          |  |  |
|       | (Type or Print Name and Title) (Type   | e or Print Name and Title)               |  |  |
| (If c | (If change of registered office by registered agent, sign here. See Note 6)  The undersigned, under penalties of perjury, affirms that the facts state                   | ted herein are true                      |  |  |
| Date  | Dated August 20 , 1999 W Self (Year) (Sanature   | 11/W/2                                   |  |  |
| -     | (Month & Day) (Year) (S gnature  | of Registered Agent of Record)           |  |  |
|       | NOTES  | 7  |  |  |
| 1.    | <ol> <li>The registered office may, but need not be the same as the principal or<br/>registered office and the office address of the registered agent must be</li> </ol> |  |  |  |

- 2. The registered office must include a street or road address; a post office box number aiche 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.

