

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

General Not For Profit Corporation Act

Jesse White, Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-3647
www.cyberdriveillinois.com

Remit payment in the form of a
check or money order payable
to the Secretary of State.

_____ File # _____ Filing Fee: \$5.00 Approved: _____
_____ Submit in duplicate _____ Type or Print clearly in black ink _____ Do not write above this line _____

1. CORPORATE NAME: _____

2. STATE OR COUNTRY OF INCORPORATION: _____

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	_____		
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Registered Office	_____		
	<i>Number</i>	<i>Street</i>	<i>Suite No. (A P.O. Box alone is not acceptable)</i>
	<i>City</i>	<i>ZIP Code</i>	<i>County</i>

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

Registered Agent	_____		
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Registered Office	_____		
	<i>Number</i>	<i>Street</i>	<i>Suite No. (A P.O. Box alone is not acceptable)</i>
	<i>City</i>	<i>ZIP Code</i>	<i>County</i>

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)

SEE REVERSE SIDE FOR SIGNATURE(S).

