	2004 FOR PROFIT CORPORATION				FILED May 03, 2004 08:00 AN Secretary of State		
						Secretary of State	
110 N WACKER NIRAGO, IL 60000       US         110 N WACKER NIRAGO, IL 60000       US	RS PROF	PERTIES THREE, INC.					
DO NOT WRITE IN THIS SPACE       0062004 No Clip-P CR2E334 (1003)         4. FEI Number 13-3073571       Indeline For 13-3073571         6. Kame and Address of Current Registered Agent       0. Certificate of Status Desired       S8.75 Acadimatic         CORPORATION SERVICE COMPANY 2021 HAYS STREET ALLAHASSEE, FL 32301       DO NOT WRITE IN THIS SPACE       DO NOT WRITE IN THIS SPACE         Are book named antibus buildement for the purpose of changing its registered office or registered agent, or both, in the Status O Fostal. I an familiar with, and accept the obligatories of registered agent and its distributed office or registered agent, or both, in the Status of Fostal. I an familiar with, and accept the obligatories of registered agent and its distributed office or registered agent and its distributed agent agent and its distributed office or registered agent and its distributed agent agent and its distributed office or registered agent and its distributed office or registered agent and its distributed agent age	110 N. WACKER 110 N. WACKER						
DO NOT WRITE IN THIS SPACE <ul> <li></li></ul>							
Sume and Address of Current Registered Agent  CORPORATION SERVICE COMPANY  I201 HAYS STREET  ALLAHASSEE, FL 32301      DO NOT WRITE  IN THIS SPACE      DO NOT WRITE  IN THIS SPACE      DOT      DO	DO NOT WRITE IN THIS SPACI				E A FEI Number Applied For 13-3073571 Not Applicable		
1201 HAYS STREET       IN THIS SPACE         In the source named entry submits this platement for the purpose of changing its registered office or registered agent, or both, in the State of Porkla. Tam familiar with, and accept the obligations of registered agent.         In the above named entry submits this platement for the purpose of changing its registered office or registered agent, or both, in the State of Porkla. Tam familiar with, and accept the obligations of registered agent.         INONTURE		6. Name and Address of Current R	egistered Agent		5. Certaicate o		
he cbligations of registered agent.  SQNATURE  Signal A, bed 37 printed name of legisterial agent and laber Acclusable  DOTE: Registered Agent agrature regured when verticaling)  After May 1, 2004 Fee will be \$550,000  P. Election Campaign Financing After May 1, 2004 Fee will be \$550,000  P. Election Campaign Financing S5,000 May Be Added to Poes  HEIGODOD146162  O5./03./04-80.053-00.7 150.00  HEIGODOD3  O OFFICERS AND DIRECTORS  O OFFICERS  O O	CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301						
0.       OFFICERS AND DIRECTORS       U00000146102         0.       OFFICERS AND DIRECTORS       05/03/04-80053-007 150.00         MKE       SIGAL, HOWARD A         MRELADRES       110 N. WACKER         ATT-S1-2P       CHICAGO, IL 60606         IIL       S         MKE       EISENBERG, MARSHALL E         MKE       BUCKSBAUM, JOHN         INEL MORSS       110 N. WACKER DR         MKE       MICHAELS, ROBERT A         INEELADRESS       110 N. WACKER DR         MKE       FREINAUM, BERNARD         MRE FADDRESS       110 N. WACKER DR         MKE       FREINAUM, BERNARD	the obligat SiGNATURE_ FIL	Signature, typed or printed name of registered agent an	d title if applicable (NOTE Register 9. Election Campaign Fina	ed Agent signalure required	t when reinstaling)		
Note       SIGAL, HOWARD A         REFL ADRESS       110 N. WACKER         N''-S1-2P       CHICAGO, IL 60606         I''       SIGAL, HOWARD A         I''       DCEO         BUCKSBAUM, JOHN       BUCKSBAUM, JOHN         I''       SIGAL, HOKARD R         I''       SIGAL, HOKARD R         I''       SIGAL, HOKARD R         I''       SIGAL         I''       SIGAL REFLORGS         I''       SI'O'''         I'''       <	O.						
ITY-ST-ZP       CHICAGO, IL 60606         ITLE       DCEO         MWE       BUCKSBAUM, JOHN         IREELADRESS       110 N. WACKER DR         ITY-S1-ZP       CHICAGO, IL 60606         MICHAELS, ROBERT A       IN CHAELS, ROBERT A         IREELADRESS       110 N. WACKER DR         ITY-S1-ZP       CHICAGO, IL 606006         MICHAELS, ROBERT A       IN THIS SPACE         ITY-S1-ZP       CHICAGO, IL 606006         ITUE       DVT         MWE       FREINAUM, BERNARD         ITREET ADDRESS       110 N WACKER DR         ITO HICAGO, IL 60606       ITUE         MWE       FREINAUM, BERNARD         ITREET ADDRESS       110 N WACKER DR         ITUE       DVT         MKE       ITUE to the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes, I further certify that the information or supplemental repod is true and accurate and that my signature shall have the same legal effect as if made under oath, that 1 am an officier or director of the corporation or thus deermental repod is true and accurate and that my signature shall have the same legal effect as if made under oath, that 1 am an officier or director of the corporation or the deermer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an ddrifess, with all o	ITLE IAME STREET ADDRESS XTY - ST - ZIP ITLE IAME STREET ADDRESS	SIGAL, HOWARD A 110 N. WACKER CHICAGO, IL 60606 S EISENBERG, MARSHALL E		_			
AWE       MICHAELS, ROBERT A         IREET ADDRESS       110 N. WACKER DR         ITV-SI-2IP       CHICAGO, IL 60606         ITUE       DVT         AWE       FREINAUM, BERNARD         ITREET ADDRESS       110 N. WACKER DR         ITV-SI-ZIP       CHICAGO, IL 60606         ITUE       DVT         KITY-SI-ZIP       CHICAGO, IL 60606         ITUE       DVT         REET ADDRESS       110 N. WACKER DR         RTY-SI-ZIP       CHICAGO, IL 60606         ITLE       MME         ITLE       MME         ITLE       AMPE         ITLE       ITTUE         ITLE       CHICAGO, IL 60606         ITLE       AMPE         ITTEET ADDRESS       ITTUE         ITTUE       ITTUE </td <td>HTY+ST-ZIP HLE HAME HREET ADDRESS HTY+ST-ZIP</td> <td>CHICAGO, IL 60606 DCEO BUCKSBAUM, JOHN 110 N. WACKER DR</td> <td></td> <td>-</td>	HTY+ST-ZIP HLE HAME HREET ADDRESS HTY+ST-ZIP	CHICAGO, IL 60606 DCEO BUCKSBAUM, JOHN 110 N. WACKER DR		-			
AWE FREINAUM, BERNARD     ITREFLADRESS     ITO N WACKER DR     HIY-SI-ZP     CHICAGO, IL 60606     TILE     MME     TREET ADDRESS     ITY-SI-ZP 2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119-07(3)(i), Florida Statutes, I further certify that the information     indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director     of the corporation or the ecciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if     changed, or on an attachment with an address, with all other like empowered.	ITLE IAME ITREET ADDRESS IITY - ST - ZIP	DP MICHAELS, ROBERT A 110 N. WACKER DR		IN THIS SPACE			
<ul> <li>AWE TREET ADDRESS ITY-ST-ZIP</li> <li>2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119-07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</li> </ul>	ITLE IAME STREET ADDRESS STY - ST - ZIP	FREINAUM, BERNARD 110 N WACKER DR					
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	<ol> <li>I hereby c indicated of the cor changed,</li> </ol>	ceruly that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empoy , or on an attachment with an address, wi	his filing does not qualify for the ex- rue and accurate and that my sign vered to execute this report as requ th all other like empowered.	ature shall have the Jired by Chapter 60	same legal effect 7, Florida Statutes	), Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director s; and that my name appears in Block 10 or Block 11 if	