

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90565 025 ****50.00

DOCUMENT # M00000002139

1. Entity Name

LINKSCORP, L.L.C.



Principal Place of Business

**2201 WAUKEGAN RD., STE. W-100
BANNOCKBURN IL 60015-1577**

Mailing Address

**2201 WAUKEGAN RD., STE. W-100
BANNOCKBURN IL 60015-1577**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **36-4274105**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Delete
NAME **J.P. MORGAN INVESTMENT CORPORATION**
STREET ADDRESS **60 WALL STREET, 14TH FLOOR**
CITY-ST-ZIP **NEW YORK NY 10260**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **BATTERSON, JOHNSON, & WANG, L.P.**
STREET ADDRESS **303 WEST MADISON, SUITE 1110**
CITY-ST-ZIP **CHICAGO IL 60606**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **WBHC LINKSCORP HOLDINGS, INC.**
STREET ADDRESS **222 WEST ADAMS, SUITE 1300**
CITY-ST-ZIP **CHICAGO IL 60606**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGR** ☐ Delete
NAME **BENSON BLAKE**
STREET ADDRESS **2201 WAUKEGAN ROAD, SUITE W-100**
CITY-ST-ZIP **BANNOCKBURN IL 60015**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **BHC LINKSCORP HOLDINGS, INC**
STREET ADDRESS **303 WEST MADISON, SUITE 1110**
CITY-ST-ZIP **CHICAGO IL 60606**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete
NAME **NORWEST EQUITY PARTNERS, IV**
STREET ADDRESS **222 SOUTH 9TH STREET #2800**
CITY-ST-ZIP **MINNEAPOLIS MN 55402**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE OF OFFICER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/28/03

Date

847.282.2000

Daytime Phone #

CR2E083 (10/02)