File on or before May 1, 1998 or Limited Liability Company will be FILED SECRETARY OF STATE DIV subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham **ANNUAL REPORT** Secretary of State 98 APR 14 PM 12: 15 1998 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Mailing Address of Limited Liability Company **DOCUMENT #** M97000000763 1a. Principal Place of Business Address ARROW FINANCIAL SERVICES, 2450 WEST PETERSON AVENUE 2450 WEST PETERSON AVENUE CHICAGO IL 60659 CHICAGO IL 60659 2. Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation a450 w peterson ave 2450 W PETERSON AVE 11/19/1997 4. FEI Number DE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State Not Applicable 11 36-4189357 Chicago CHICAGO IL 5. Date of Last Report 6. Certificate of Status Desired Country 60659 60659 U-5A \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR LAVIN, JACK 2450 WEST PETERSON AVENUE CHICAGO IL 60659 MGR 60054 LAVIN, RONALD 2450 WEST PETERSON AVENUE CHICAGO IL MGR CUTLER, BRIAN 2450 WEST PETERSON AVENUE CHICAGO IL 60659 900002491269--4

11. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE 2

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBI

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