SHERIFF'S OFFICE OF COOK COUNTY
AFFIDAVIT OF SERVICE

CASE NUMBER: 2022L010246 **SHERIFF NUMBER:** 03709202 **MULT. SER.:** 1 **DOC. TYPE:** LAW

DIE DATE: 01/14/2023 **RECEIVED DATE:** 01/06/2023 **FILED DATE:** 01/06/2023 **DIST:** 305

DEFENDANT: GP OPPORTUNITY FUND LLC
ADDRESS: 7355 GARDEN
CITY: RIVER FOREST
STATE: IL ZIP CODE: 60305
ATTACHED FEE AMT:
SERVICE INFORMATION: C/O GP OPPORTUNITY CORP

PLAINTIFF: 30 DEGREE DESIHN LLC
ATTORNEY: GURVEY MATTHEW E
ADDRESS: 7355 WASHINGTON
CITY: CHICAGO
STATE: IL ZIP CODE: 60602

I CERTIFY THAT I SERVED THE DEFENDANT/RESPONDENT AS FOLLOWS:

☐ **(1) PERSONAL SERVICE:** BY LEAVING A COPY OF THE WRIT/ORDER WITH THE DEFENDANT/RESPONDENT PERSONALLY, AND INFORMING DEFENDANT/RESPONDENT OF CONTENTS.

☐ **(2) SUBSTITUTE SERVICE:** BY LEAVING A COPY OF THE SUMMONS AND COMPLAINT AT THE DEFENDANT'S USUAL PLACE OF ABODE WITH A FAMILY MEMBER OR PERSON RESIDING THERE, 13 YEARS OR OLDER, AND INFORMING THAT PERSON OF THE CONTENTS OF THE SUMMONS. ALSO, A COPY OF THE SUMMONS WAS MAILED TO THE DEFENDANT AT HIS OR HER USUAL PLACE OF ABODE ON THE DAY OF _ 20.

☐ **(3) UNKNOWN OCCUPANTS:** BY LEAVING A COPY OF THE SUMMONS AND COMPLAINT NAMING "UNKNOWN OCCUPANTS" WITH A PERSON OF THE AGE OF 13 OR UPWARDS OCCUPYING SAID PREMISE.

☐ **(4) CORP/CO/BUS/PART:** BY LEAVING THE APPROPRIATE NUMBER OF COPIES OF THE SUMMONS, COMPLAINTS, INTERROGATORIES, JUDGMENTS, CERTIFICATIONS AND NOTICES WITH THE REGISTERED AGENT, AUTHORIZED PERSON OR PARTNER OF THE DEFENDANT CORPORATION ____COMPANY____BUSINESS _____ PARTNERSHIP ___

☐ **(5) PROPERTY RECOVERED:** NO ONE PRESENT TO RECEIVE ORDER OF COURT. ORDER POSTED IN PLAIN VIEW.

☐ **(6) S.O.S/D.O.I.:** BY LEAVING THE SUMMONS AND COMPLAINT WITH THE SECRETARY OF THE STATE/DIRECTOR OF INSURANCE OF THE STATE OF ILLINOIS, AN AGENT OF SAID DEFENDANT LISTED ABOVE. ANY AGENT OF SAID CORPORATION NOT FOUND IN THE COUNTY OF COOK.

☐ **(7) CERTIFIED MAIL**

****** COMPLETE THIS SECTION IF WRIT IS A THIRD PARTY CITATION/GARNISHMENT ******

(8) AND BY MAILING ON THE ___ DAY OF _____ 20 _____ A COPY OF THE THIRD PARTY GARNISHMENT/CITATON SUMMONS AND NOTICE TO THE JUDGMENT DEBTOR'S LAST KNOWN ADDRESS AS INDICATED IN THE NOTICE WITHIN (2) BUSINESS DAYS OF SERVICE UPON GARNISHEE/THIRD PARTY DEFENDANT.

THE NAMED DEFENDANT WAS NOT SERVED FOR THE GIVEN REASON BELOW:

☑	(01) NO CONTACT	☐	(05) WRONG ADDRESS	☐	(09) DECEASED
☐	(02) MOVED	☐	(06) NO SUCH ADDRESS	☐	(10) NO REGISTED AGENT
☐	(03) EMPTY LOT	☐	(07) EMPLOYER REFUSAL	☐	(11) OUT OF COOK COUNTY
☐	(04) NOT LISTED	☐	(08) CANCELLED BY PLAINTIFF ATTY	☐	(12) OTHER REASON (EXPLAIN)

EXPLANATION: per current occupant (Tagali and Associates) def does not exist here

WRITE SERVED ON: _____
SEX: _____ RACE: _____ AGE: _____
THIS 11 DAY OF Januar y 20 23
TIME: _____

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THOMAS J. DART,
SHERIFF, BY: /S/ COVARRUBIAS, RAMIRO #11629 , DEPUTY

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