

# UNOFFICIAL COPY

NFP-113.15  
(Rev. Jan. 1999)

JESSE WHITE  
Secretary of State • State of Illinois

File #

**SUBMIT IN DUPLICATE**  
Payment must be made by certified check, cashiers' check or a money order, Illinois attorney's check, Illinois C.P.A.'s check, payable to "Secretary of State."  
Telephone (217)782-3647  
http://www.sos.state.il.us

**APPLICATION FOR CERTIFICATE OF AUTHORITY TO CONDUCT AFFAIRS IN ILLINOIS**  
under the  
**GENERAL NOT FOR PROFIT CORPORATION ACT**

This Space For Use By Secretary of State	
Date	12-31-07
Filing Fee	\$ 50
Approved	<i>[Signature]</i>

Pursuant to the provisions of "The General Not For Profit Corporation Act of 1986," the undersigned corporation hereby applies for a certificate of authority to conduct affairs in the State of Illinois and submits the following statement.

1. (a) CORPORATE NAME: Neighborhood Assistance Corporation of America

(b) ASSUMED CORPORATE NAME: NA


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1444/0081 30 001 Page 1 of 2  
2002-01-24 12:16:31  
Cook County Recorder 23.50

(By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the conducting of affairs in Illinois. Form NFP 104.15 is attached.)

2. State or Country of Incorporation MA; Date of Incorporation 7-12-94; Period of Duration perpetual

3. The address of its principal office, wherever located, is 3607 Washington St, Boston, MA 02130

and the address of its principal office in Illinois is \_\_\_\_\_  
  
0020098649

4. The name and address of its registered agent and its registered office in Illinois are:

Registered Agent	<u>Lisa</u>		
	First Name	Middle Name	Last Name
Registered Office	<u>E. 85th Street</u>		
	Number	Street	Suite # (A.P.O. box alone is not acceptable)
	<u>1400</u>	<u>E. 85th Street</u>	
	City	ZIP Code	County
	<u>Chicago, IL</u>	<u>60619</u>	<u>Cook</u>



5. The states and countries in which it is admitted or qualified to conduct affairs are: MA

6. The names and respective residential addresses of its officers and directors are:

	No. & Street	City	State	ZIP
President				
Secretary				
Director				
Director				
Director				

Please see attached

If more than 3, attach list

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7. The purpose or purposes for which it is organized and which it proposes to pursue in the conduct of affairs in this State are:

If not sufficient space to cover this point, add one or more sheets of this size.

See attached statement of purpose

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8. This application is accompanied by a copy of the articles of incorporation, as amended, duly authenticated by the proper officer of the State or Country wherein it is incorporated, which certification is not more than ninety (90) days old.
9. The undersigned corporation has caused this application to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in **BLACK INK.**)

of America

Dated November 16, 2001 Neighborhood Assistance Corporation  
(Month & Day) (Year) (Exact Name of Corporation)  
attested by MARISKA ANDREW PIRAZZI by Bruce Marks  
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)  
(Type or Print Name and Title) (Type or Print Name and Title)

A corporation which is to function as a club, as defined in Section 1-3.24 of the "Liquor Control Act of 1934," must insert in its purpose clause a statement that it will comply with the State and local laws and ordinances relating to alcoholic liquors.

FORM NFP-113.15

File No.

APPLICATION FOR CERTIFICATE  
OF AUTHORITY TO CONDUCT  
AFFAIRS IN ILLINOIS  
under the  
GENERAL NOT FOR PROFIT  
CORPORATION ACT

Filing Fee \$50

**FILED**

DEC 31 2001

JESSE WHITE  
SECRETARY OF STATE

RETURN TO:

Department of Business Services  
Secretary of State  
Springfield, Illinois 62756  
Telephone (217) 782-1834

C-160.10