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2002-05-14 12:48:53
Cook County Recorder 23.50



0020551085

Property of Cook County Clerk's Office

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(Rev. Jan. 1999)

of
DOMESTIC OR FOREIGN CORPORATIONS

File # 54071248

Jesse White
Secretary of State
Department of Business Services
Springfield, IL 62756
<http://www.sos.state.il.us>

This space for use by Secretary of State

SUBMIT IN DUPLICATE!

FILED

APR 10 2002

JESSE WHITE
SECRETARY OF STATE

This space for use by
Secretary of State

Date 4-10-02
Filing Fee \$ 100.00
Approved: [Signature]

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

1. (a) Corporate name as of the date of issuance of the certificate of dissolution or revocation:
SERVUS WIN-DOOR CORPORATION [Signature]
- (b) Corporate name as changed: _____ (Note 1)
- (c) If a foreign corporation having a certificate of authority under an assumed corporate name restriction, the assumed corporate name: _____ (Note 2)

2. State of incorporation: Illinois

3. Date that the certificate of dissolution or revocation was issued: MAY 1 2001

4. Name and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: (Note 3) NOTICE! Completion of item #4 does not constitute a registered agent or office change. See note #3 on back of this form.

Registered Agent	<u>LAWRENCE</u> First Name	<u>J.</u> Middle Name	<u>Stark</u> Last Name
Registered Office	<u>221 N. LaSalle</u> Number	<u>2800</u> Street	<u>2800</u> Suite # (A P.O. Box alone is not acceptable)
	<u>Chicago</u> City	<u>IL</u> ZIP Code	<u>COOK</u> County

5. This application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, license fee and penalties required.

6. The undersigned corporation has caused this statement 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.**)

Dated 2-12- 02 SERVUS WIN-DOOR CORP
(Month & Day) (Year) (Exact Name of Corporation)

attested by [Signature] by [Signature]
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)

Bob A Maupin Bob A Maupin
(Type or Print Name and Title) (Type or Print Name and Title)