**LLC-5.5** January 2000

Jesse White Secretary of State Department of Business Services Limited Liability Company Division Room 359, Howlett Building Springfield, IL 62756 http://www.sos.state.il.us

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check **Limited Liability Company Act Articles of Organization** 

## SUBMIT IN DUPLICATE

Must be typewritten

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Assigned File # 007/

This space for use by Secretary of State

MAY 28 2002

JESSE WHITE SECRETARY OF STATE

r money order, payable to "Secreta f State."	Approved: \$400	.00 SECRETO
Limited Liability Compa	any Name:	
4527-20 S. PR 41PIE (	SKYLINE CONDOMINIUN	0020887696
(The LLC name must contain th	e words limited liability company, L.L.C	c. or LLC and cannot contain the terms corporation, cerp., incorporated, 2002-08-13 16:56:45
inc., ltd., co., limited partress;	unuer an assumed name, c	omplete and attach Form LLC 1.20. 23.50
The address of its princ	cipai place of business: (Pos	t office box alone and c/o are unacceptable.)
3925 W. OAKTON S	SKOKIE, 12, 00070	002702
The Articles of Organiz	ation are effective on: (Chec	0020887696 ck one)
a) the filing dat	te, or b) another date to the filing	e later than but not more than 60 days subsequent dute (month, day, year)
The registered agent's	name and registered office	address is:
Registered agent:	LYDIA First Name	TOHATAN  Middle Initial Last Name
Registered Office: (P.O. Box and c/o are unacceptable)	3925 W. OAKTON Number SKOKIE, IL.	Street Suite # COOK
Purpose or purposes (If not sufficient space to cover	City  for which the LLC is organi this point, add one or more sheets of the	zed: Include the business code # (IXS Form 1065).  his size.)  hich limited liability companies may be organized under
. The latest date, if any,	upon which the company is	to dissolve (month, day, year)
Any other events of dis	solution enumerated on an	ettachment. (Optional)  MAIL 70  LLC-4.5
		MAIL IU MARTIN COTTON 630 JUNIPER 61ENVIEW 60025
		61ENVIEW TO 60025

24				
	<i>:-</i>	PLC-5.5		

## **UNOFFICIAL COPY**

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8.	Other provisions for the regulation of the internal	affairs of the	LLC per Section	1 5-5 (a) (8) included	as attachment:
	If yes, state the provisions(s) from the ILLCA.	☐ Yes	No		
9.	a) Management is by manager(s): If yes, list names and business addresses.	Yes	No	() ()	2088769
		ton S waukee	□ No kokie, Il. kokie, Il. Niles, Il. Nıles, Il.	60076 60714	
10.	I affirm, under penalties of perjury, having author of my knowledge and belief, true, correct and co	Ty to sign he imply.e.	ereto, that these a	articles of organizatio	n are to the best
	(Month/Day)	(Yea.)	78		
	Signature(s) and Name(s) of Organizer(s)		( ).	siness Address(es)	
1	- AMM.	1.		akton 	
1.	Signature Lydia Tohatan		Number Skokie, 1	Street	
	(Type or print name and title)			Cn, Town	
					ZIP Code
	(Name if a corporation or other entity)	•	State	Visc.	211 0000
2.	Signature	2.	Number	Stroet	
	(Type or print name and title)			CitylTown	
			State	<del></del>	ZIP Code
•	(Name if a corporation or other entity)	3.	State		211 0000
3	Signature		Number	Street	
	(Type or print name and title)			City/Town	
	(Name if a comoration or other entity)		State		ZIP Code

(Signatures must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)