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Cook County Recorder 23.50

Form **BCA-2.10** | ARTICLES OF INCORPORATION

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

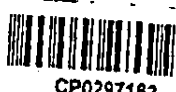
Date
Franchise Tax \$ 25.00
Filing Fee \$ 75.00
Approved: BE **\$100.00**

(Rev. Jan. 1995)
George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756

This space for use by Secretary of State

Filed 7/17/2002

Jesse White Secretary of State



62315423

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. CORPORATE NAME: DR. DONALD K. SZACHOWICZ, M.D., S.C. BE

(The corporate name must contain the word "corporation", "company," "incorporated," "limited" or an abbreviation thereof.)

2. Initial Registered Agent: DR. DONALD K. SZACHOWICZ, M.D.
First Name Middle Initial Last name

Initial Registered Office: 6734 PECKWITH ROAD
Number Street Suite #
MORTON GROVE IL 60053
City Zip Code County

3. Purpose or purposes for which the corporation is organized:
(If not sufficient space to cover this point, add one or more sheets of this size.)
TO OWN, OPERATE AND MAINTAIN AN ESTABLISHMENT FOR THE STUDY, DIAGNOSIS AND TREATMENT OF HUMAN AILMENTS AND INJURIES, WHETHER PHYSICAL OR MENTAL, AND TO PROMOTE MEDICAL, SURGICAL, AND SCIENTIFIC RESEARCH AND KNOWLEDGE PROVIDED THAT MEDICAL OR SURGICAL TREATMENT, ADVICE OR CONSULTATION WILL BE GIVEN BY EMPLOYEES OF THE CORPORATION ONLY IF THEY ARE LICENSED PURSUANT TO THE MEDICAL PRACTICE ACT.

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4. Paragraph 1: Authorized Shares, Issued Shares and Consideration Received:

Class	Par Value per Share	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
COMMON	\$ NO PAR	1000	501	\$ 1,000.00
				TOTAL = \$ 1,000.00

Paragraph 2: The preferences, qualifications, limitations, restrictions and special or relative rights in respect of the shares of each class are:
(If not sufficient space to cover this point, add one or more sheets of this size.)

UPON THE DEATH OR DISQUALIFICATION OF A SHAREHOLDER TO OWN SHARES IN THE CORPORATION UNDER SECTION 15/13 OF THE BUSINESS CORPORATION ACT OF 1983, THE CORPORATION SHALL HAVE THE RIGHT TO PURCHASE THE SHARES OF THE DECEASED OR DISQUALIFIED SHAREHOLDER AT BOOK VALUE PURSUANT TO SECTION 15/16 OF THE BCA. IN THE EVENT THE CORPORATION DECLINES TO PURCHASE SAID SHARES, OR ANY PORTION THEREOF, THEN THE EXISTING SHAREHOLDERS MAY DO SO IN PRORATION TO THEIR RESPECTIVE OWNERSHIP INTEREST IN THE CORPORATION.

(over)

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5. **OPTIONAL:** (a) Number of directors constituting the initial board of directors of the corporation: 1
 (b) Names and addresses of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and qualify:

<u>Name</u>	<u>Residential Address</u>	<u>City, State, ZIP</u>
DR. DONALD K. SZACHOWICZ, M.D.	6734 BECKWITH RD.,	MORTON GROVE, IL 60053

6. **OPTIONAL:** (a) It is estimated that the value of all property to be owned by the corporation for the following year wherever located will be:
 (b) It is estimated that the value of the property to be located within the State of Illinois during the following year will be:
 (c) It is estimated that the gross amount of business that will be transacted by the corporation during the following year will be:
 (d) It is estimated that the gross amount of business that will be transacted from places of business in the State of Illinois during the following year will be:

\$ _____
COOK COUNTY
 \$ _____
RECORDER
 \$ _____
EUGENE "GENE" MOORE
 \$ _____
SKOKIE OFFICE

7. **OPTIONAL: OTHER PROVISIONS**

Attach a separate sheet of this size for any other provision to be included in the Articles of Incorporation, e.g. authorizing preemptive rights, denying cumulative voting, regulating internal affairs, voting majority requirements, fixing a duration other than perpetual, etc.

8. **NAME(S) & ADDRESS(ES) OF INCORPORATOR(S)**

The undersigned incorporator(s) hereby declare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated JUNE 27, 2002, 1902.

<u>Signature and Name</u>	<u>Address</u>
1. <u>Donald K. Szachowicz MD</u> <i>Signature</i>	1. <u>6734 BECKWITH ROAD</u> <i>Street</i>
<u>DR. DONALD K. SZACHOWICZ, M.D.</u> <i>(Type or Print Name)</i>	<u>MORTON GROVE, IL 60053</u> <i>City/Town State Zip Code</i>
2. _____ <i>Signature</i>	2. _____ <i>Street</i>
_____ <i>(Type or Print Name)</i>	_____ <i>City/Town State Zip Code</i>
3. _____ <i>Signature</i>	3. _____ <i>Street</i>
_____ <i>(Type or Print Name)</i>	_____ <i>City/Town State Zip Code</i>

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

NOTE: If a corporation acts as incorporator, the name of the corporation and the state of incorporation shall be shown and the execution shall be by its president or vice president and verified by him, and attested by its secretary or assistant secretary.

FEE SCHEDULE

The initial franchise tax is assessed at the rate of 15/100 of 1 percent (\$1.50 per \$1,000) on the paid-in capital represented in this state, with a minimum of \$25.

- The filing fee is \$75.
 - The **minimum total due** (franchise tax + filing fee) is **\$100**.
(Applies when the Consideration to be Received as set forth in Item 4 does not exceed \$16,667)
 - The Department of Business Services in Springfield will provide assistance in calculating the total fees if necessary.
- Illinois Secretary of State Springfield, IL 62756
 Department of Business Services Telephone (217) 782-9522 or 782-9523

C-162.18

MAIL TO: DR. DONALD K. SZACHOWICZ, M.D.
6734 BECKWITH ROAD
MORTON GROVE, IL 60053