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Form BCA-12.45/

13.60

APPLICATION FOR REINSTATEMENT of DOMESTIC OR FOREIGN CORPORATIONS

Eugene "Gene" Moore Fee: \$26.00 Cook County Recorder of Deeds Date: 07/28/2003 12:46 PM Pg: 1 of 1

File # \$ 5701-734-1

(Rev. Jan. 1999)

Jesse White Secretary of State Department of Business Services 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 or money order, payable to "Secretary of Stale."

This space for use by Secretary of State

## FILED

JUN 1 2 2003

JESSE WHITE SECRETARY OF STATE

## SUBMIT IN DUPLICATE!

This space for use by Secretary of State

BOX 170

Date (

6-12-03

Filing Fee

\$ 100.00

Approved:

				<del></del>		
1.	(a)	Corporary name as of the date of issuance of the certificate of dissolution or revocation:  State Minzie Associates, Inc.				
	(b)	Corporate name as charle	changed:			
	(-7	(Note 1)				
	, ,	If a favoius garagetian beging a systificate of outbouits under an accuracy agreement many analysis to the				
	(c)	If a foreign corporation having a cortificate of authority under an assumed corporate name restriction, the assumed corporate name:				
2.	Stat	State of incorporation: #1\\\n o\s				
3.	Dat	Pate that the certificate of dissolution or revocation was issued:				
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		John		Finn	
			First Name	Middle Name	Last Name	
	Registered Office		Number Street Suite # (A P.O. So, alone is not acceptable)			
			Number Str	eet Suite # (A P.C.		
			Chicago	ZIP Code	GOG\O	
			City			
5.		This application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, cense 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 <b>BLACK INK</b> .)					
	1/11 2003 extra Alexander Tre					
	Dated (Month & Day) (Year) (Exact Name of Comporation)					
	attested by Margaret Pragues by William Brown of Brown of Straight					
	ane	(Signature of Secretary	or Assistant Secretary)	(Signature of Presiden	t or Vice President)	
	Secretory (Type or Print Name and Title)			President		
	(Type or Print Name and Title)		Name and Title)	(Type or Print Name and Title) RECORDING DESK		
					CANDING DESK	