UNOFFICIAL COPY

Form LLC-5.5

March 2002

Jesse White Secretary of State Department of Business Services Limited Liability Company Division Room 351, Howlett Building Springfield, IL 62756 http://www.ilsos.net

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."

Illinois Limited Liability Company Act Articles of Organization

SUBMIT IN DUPLICATE

Must be typewritten

This space for use by Secretary of State

Date 09.03.2003 Assigned File # 0099 42£6

Filing Fee

\$400.00

Approved: 73



SEP 0 3 2003

JESSE WHITE SHORETARY OF STATE

Limited Liaoility Compa	ny Name: 5002 NE	WPORT, LLC	
00			
(The LLC name must contain inc., ltd., co., limited partnership	words limited tiability company, L	L.C. or LLC and cannot contain the term	s corporation, corp., incorporated,
If transacting business	under an assumed name,	complete and attach Form L	LC-1.20.
	0~		
The address of its princ	ipal place of business: (P	ost office box alone and c/o a	re unacceptable.)
8537 Karl	ov, Skokie, HL 6	0076	
The Articles of Organiza	ation are effective on: (Ci	eck one)	
a) X the filing date	e, or b) another d	ate later than but not more tha	an 60 days subsequent
	to the filin	g date:	
		(month, day, year)	
The registered agent's r	name and registered offic	e address is:	
Registered agent:	Phillip	A. tı	Couri
	First Name	Middle Initial	Last Name
Registered Office:	552	Lincoln	
(P.O. Box and	Number	Street	Suite #
c/o are unacceptable)	Winnetka	60093	U/Sc.
• •	City	ZIP Code	County

Purpose or purposes for which the LLC is organized: Include the business code # (IR5) form 1065). (If not sufficient space to cover this point, add one or more sheets of this size.)

"The transaction of any or all lawful business for which limited liability companies may be organized under this Act."

Business Code #8999

Doc#: 0332550314

Eugene "Gene" Moore Fee: \$26.00

Cook County Recorder of Deeds

Date: 11/21/2003 03:27 PM Pg: 1 of 2

Any other events of dissolution enumerated on an attachment. (Optional)

0332550314 Page: 2 of 2

UNOFFICIAL COPY

LLC-5.5

8.	Other provisions for the regulation of the internal af	fairs of th	e LLC per Section 5	-5 (a) (8) included a	s 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		
	Ian Jasenof 8537 Karlov Skokie, IL 60076				
		_	- .		
	b) Management is resident in the member(s): If yes, list names and addresses.	_ Yes	⊠ No		
	3				
	00/				
10.	I affirm, under penalties of perjury, having authority of my knowledge and belief, true, correct and comp	o sian ho lete	ereto, that these artic	cles of organization	are to the best
	Dated September 3,	2003	6		
	(Month/Day)	(Year)	2		
	Signature(s) and Name(s) of Organizer(s)		i sind	ess Address(es)	
1.	Mary Jo Parola	1.	801 Adlai Stev		
	Mary Jo Parola, Assistant Secretary (Type or print name and litte)		Number Springfield,	Street City, Toy a	
	Illinois Corporation Service Company, (Name if a corporation or other entity) Corp.	A DE	IL		52703
0	(Name if a corporation or other entity) Corp.		State	, (C)	
2.		2.		~~	ZIP Code
۷.	Signature	2.	Number	Street	ZIP Code
۷.	Signature (Type or print name and title)	2.	Number	Street City/Town	ZIP Code
۷.		2. 	Number State		ZIP Code
3.	(Type or print name and title)	2. 			
	(Type or print name and title) (Name if a corporation or other entity)		State	City/Town	

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