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

(Rev. Jan. 1999)

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

Jesse White Secretary of State

DATE FILED: 3/26/2004

63437409

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date

Franchise Tax \$ 25.00
Filing Fee \$ 150.00

Approved: **PHS**

1. CORPORATE NAME: Village Center Development, Inc.

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

2. Initial Registered Agent: Nick Mlade

First Name	Middle Initial	Last name
Nick		Mlade

Initial Registered Office: 2511 Sycamore Rd.

Number	Street	Suite #
2511	Sycamore Rd.	
Riverside	IL, Cook	60546
City	County	Zip Code

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.)

The transaction of any or all lawful purposes for which corporations may be incorporated under the Illinois Business Corporation Act of 1983

Real estate development

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	\$ 1.00	1,000,000	1,000	\$ 1,000
				TOTAL = \$ 1,000

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.)

(over)

03/26/2004 12:26PM



Doc#: 0409234032
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 04/01/2004 11:12 AM Pg: 1 of 2

(523486-010JH2)

BOX 314

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5. **OPTIONAL:** (a) Number of directors constituting the initial board of directors of the corporation: _____
 (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:

Name	Residential Address	City, State, ZIP

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: \$ _____

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 March 26 2004
 (Month & Day) Year

Signature and Name	Address
1. <u><i>Pamela J. Ball</i></u> Signature PAMELA J. BALL, ASST. SEC. (Type or Print Name)	1. 801 ADLAI STEVENSON DR. Street SPRINGFIELD, IL 62703 (City/Town State ZIP Code)
2. _____ Signature ILLINOIS CORPORATION SERVICE COMPANY, A (Type or Print Name)	2. _____ Street City/Town State ZIP Code
3. _____ Signature DELAWARE CORPORATION (Type or Print Name)	3. _____ Street City/Town State ZIP Code

(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