FORM BCA 12.45/13.60 (rev. Dec. 2003)

APPLICATION FOR REINSTATEMENT

DOMESTIC/FOREIGN CORPORATIONS

Business Corporation Act

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Foreign (217) 782-1837 Domestic (217) 785-5782 Domestic (217) 782-5797

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JESSE WHITE

Remit payment in the form of a cashie

ECRETARY OF STATE

check, certified check, money order

Dennis R. Heurlin - Treasurer (Print name and title)



		ois attorney's or CPA's check of the Secretary of State.					
	-		File#_D 433	2-575-2 Filing	; Fee: \$200.00 App	roved: M C	
		Svt.n.it in duplicate		early in black ink-	• •		
1.	(a) Corporate name as of the date of issuance of the certificate of dissolut					vocation:	
	(b)	Corporate name if chan			•		
	(c)	If a foreign corporation I corporate name (note 3)	naving authority un	der an assumed con	porate name res	striction, the assumed	
2.	Stat	te of incorporation:		Tilinois			
3.	Date	e that the certificate of dissolution or revocation was issued: 1/2/64					
4.	Nan NO	Name and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: NOTICE! Completion of item #4 does not constitute a registered agent or office change. (note 4)					
	2	Registered Agent	Den ni s First Name	0 (2/2.	Smith Last Name	
•	Y	Registered Office	lo 7 o	Bluff Cit	y Blod.		
			C 1 =	Street Suite #	' (A P.O. BOX ALC	E IS NOT ACCEPTABLE)	
			Elgin	IL	60/20	Cook	
			City		ZIP Code	County	
<u>5</u> .	This licen	application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, see fee and penalties required. (note 1)					
5.	The unde	undersigned corporation her penalties of perjury, that	as caused this appli the facts stated he	cation to be signed b rein are true. (All sign	y a duly authorize natures must be	ed officer who affirms, in BLACK INK .)	
	Date By	d 2/23/04 (Month, Day & Year)	di	Exact Name	Sheet Me of Corporation)	tal Company, In	
	- 7	(Any Authorized Off	īcer's Signature)	·····			