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

6329-809-3

(Rev. Jan. 1999)

This space for use by Secretary of State

Jesse White
Secretary of State
Department of Business Services
Springfield, IL 62756
<http://www.cyberdriveillinois.com>

Filed: 1/16/2004

SUBMIT IN DUPLICATE!

This space for use by
Secretary of State

Date Filed: 1/16/2004

Franchise Tax \$ 25.00
Filing Fee \$ 150.00
\$ 175.00

Approved: JR

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."



0410031036

Doc#: 0410031036
Eugene "Gene" Moore Fee: \$26.50
Cook County Recorder of Deeds
Date: 04/09/2004 11:26 AM Pg: 1 of 2

1. CORPORATE NAME: FINE

JR

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

2. Initial Registered Agent:	<u>Charles</u>	<u>B.</u>	<u>Friedman</u>
	<i>First Name</i>	<i>Middle Initial</i>	<i>Last name</i>
Initial Registered Office:	<u>39 South LaSalle Street</u>	<u>808</u>	
	<i>Number</i>	<i>Street</i>	<i>Suite #</i>
	<u>Chicago</u>	<u>IL 60603</u>	<u>Cook</u>
	<i>City</i>	<i>ZIP Code</i>	<i>County</i>

3. Purpose or purposes for which the corporation is organized:

45

(If not sufficient space to cover this point, add one or more sheets of this size.)

To sell at retail packaged liquor, spirits, wine, beer, and other packaged beverages and products; to sell at retail items accessory to the foregoing products; to generally do all things necessary to the foregoing; to buy, sell, and/or lease personal and real property of all types.

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 Value	100,000	1,000	\$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: None.

(If not sufficient space to cover this point, add one or more sheets of this size.)

(over)

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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 December 30, 2013
(Month & Day) Year

Signature and Name	Address
1.  Signature <u>Tatyana TOMASHEVSKAYA</u> (Type or Print Name)	1. <u>2029 Cambria Court</u> Street <u>Northbrook</u> IL <u>60062</u> City/Town State ZIP Code
2. _____ Signature _____ (Type or Print Name)	2. _____ Street _____ City/Town State ZIP Code
3. _____ Signature _____ (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