## **UNOFFICIAL COPY**

FORM **BCA 13.15** (rev. Dec. 2003) **APPLICATION FOR AUTHORITY TO** TRANSACT BUSINESS IN ILLINOIS

**Business Corporation Act** 

Jesse White, Secretary of State **Department of Business Services** Springfield, IL 62756 Telephone (217) 782-1834 www.cyberdriveillinois.com

Remit payment in the form of a cashier's check, certified check, money order or an illinois attorney's or CPA's check

FILED

MAY 0 5 2004

JESSE WHITE SECRETARY OF STATE

(0352-961-3



Doc#: 0412834074

Eugene "Gene" Moore Fee: \$28.00 Dook County Recorder of Deeds Date: 05/07/2004 01:04 PM Pg: 1 of 3

| uni té    | Fee \$_ <u>150</u>   | Franchise Tax \$ 2   | 5'W Bon  | alty/interest \$   | Total \$i              | 7 E. W                                    |   |  |  |
|-----------|--|--|--|--|------------------------|---|---|--|--|
|           |  |  |  |  |                        |   | Approved:                                 |  |  |
|           |  | <b>Y</b>   | acomble Coming   | rrly in black ink————  | Do not write above     | this line                                 |   |  |  |
|           | (a) CORPORAT   | E NAME:  | Assembly Service   | s, inc.  |                        |   |   |  |  |
|           |  |  |  |  |                        |   |   |  |  |
|           | (Complete item 1 (b) only if the corporate name is not available in this state.)   |  |  |  |                        |   |   |  |  |
|           | (b) ASSUMED (  | CORPORATE NAME.  | c  |  |                        |   |   |  |  |
|           | (By electing   | this assumed name t  | t - curporation  | hereby agrees NOT to   |                        | <del> </del>                              | _   |  |  |
|           | transaction o  | of business in Illinois.   | Form BCA 4.15  | is attached )  | use its corpora        | te name in                                | the                                       |  |  |
| _         |  |  |  |  |                        |   |   |  |  |
|           | State or Country   | Now Issues   | Date of  | 4.4.4  | Period of              |   | -   |  |  |
|           | of Incorporation   | New Jersey   | Incorpo atio   | n 12/18/2003   |                        | Perpetual                                 |   |  |  |
|           |  |  |  |  |                        |   |   |  |  |
|           | (a) Address of the   | o principal office   |  | 0,   | <del></del>            |   |   |  |  |
|           | (u) Address of the   | ne principal office, wh  | erever located;  | 9,5  | principal office in    | n Illinois:                               |   |  |  |
|           | 3 Progress St. Suit  | e 100, Edison, NJ 0882   | 20   | None (If nor   | ne, so state)          |   |   |  |  |
|           |  |  |  | 110110   |                        | <del></del>                               | <del></del>                               |  |  |
|           |  |  |  |  |                        |   |   |  |  |
|           |  |  |  |  |                        |   |   |  |  |
|           |  |  |  |  | 9.                     |   |   |  |  |
|           |  |  |  |  |                        |   |   |  |  |
|           |  |  |  |  |                        | <del></del>                               | ·   |  |  |
|           | Name and address   | of the registered age  | ent and register   | ed office in Illinois  | 7.0                    |   |   |  |  |
|           |  | of the registered age  |  | ed office in Illinois.   | 75                     | <del></del>                               |   |  |  |
|           | Name and address   | C T CORPORATION  |  | ed office in Illinois.   | <del>T</del> SC        | )   |   |  |  |
|           | Registered Agent:  | C T CORPORATION  | N SYSTEM   | ed office in Illinois.  Middle Initial   | #sc                    | L'ast name                                |   |  |  |
|           | Registered Agent:  | C T CORPORATION  First Name 208 S. LaSalle Street,   | N SYSTEM   |  | Ťý C                   | L'ast name                                |   |  |  |
|           | Registered Agent:  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number   | N SYSTEM   | Middle Initial<br>Street   |                        | Stuit ett                                 | (A P.O. Box alone                         |  |  |
|           | Registered Agent:  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago   | N SYSTEM   | Middle Initial Street 60604  | Cook                   | Stuit ett                                 |   |  |  |
|           | Registered Agent:  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number   | N SYSTEM   | Middle Initial<br>Street   |                        | Stuit ett                                 | (A P.O. Box alone                         |  |  |
|           | Registered Agent: Registered Office:   | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City   | Suite 814  | Middle Initial Street 60604 ZIP Code   | Cook                   | Suit +                                    | (A P.O. Box alone<br>s not acceptable.)   |  |  |
| (         | Registered Agent: Registered Office: States and countrie   | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City   | Suite 814  | Middle Initial Street 60604  | Cook                   | Suit +                                    | (A P.O. Box alone<br>s not acceptable.)   |  |  |
| ;         | Registered Agent: Registered Office:   | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City   | Suite 814  | Middle Initial Street 60604 ZIP Code   | Cook                   | Suit +                                    | (A P.O. Box alone<br>s not acceptable.)   |  |  |
| ;<br>!Jew | Registered Agent: Registered Office: States and countrie V Jersey & Florida  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitted   | Suite 814  ed or qualified t   | Middle Initial Street 60604 ZIP Code to transact business: (I  | Cook                   | Suit + +   County                         | (A P.O. Box alone s not acceptable.)      |  |  |
| ;         | Registered Agent: Registered Office: States and countrie V Jersey & Florida  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitted   | Suite 814  ed or qualified t   | Middle Initial Street 60604 ZIP Code   | Cook                   | Suit + +   County                         | (A P.O. Box alone s not acceptable.)      |  |  |
| ;         | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address   | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitted to the control of the con | Suite 814  ed or qualified t   | Middle Initial Street 60604 ZIP Code to transact business: (I  | Cook                   | Suit + +   County                         | (A P.O. Box alone s not acceptable.)      |  |  |
| i i       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitted es of officers and direct   | Suite 814  ed or qualified tectors: (If more to  | Middle Initial  Street 60604  ZIP Code to transact business: (If than 3 directors and/or City  | Cook                   | Suit + +   County                         | (A P.O. Box alone s not acceptable.)  On) |  |  |
| Jew I     | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William  | C T CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St.   | Suite 814  ed or qualified tectors: (If more to  | Middle Initial  Street 60604  ZIP Code to transact business: (If than 3 directors and/or City  on, NJ 08820  | Cook                   | Suit #   County incorporation             | (A P.O. Box alone s not acceptable.)  On) |  |  |
| lev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances  | CT CORPORATION  First Name 208 S. LaSalle Street, Number Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to suite 100, Edisc St. Suite 100, Edisc St. Suite 100, Edisc   | Middle Initial  Street 60604  ZIP Code to transact business: (Inthan 3 directors and/or City on, NJ 08820 Ison, NJ 08820 Ison, NJ 08820  | Cook                   | Suit #   County incorporation             | (A P.O. Box alone s not acceptable.)  On) |  |  |
| Vev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William                                   | CT CORPORATION  First Name 208 S. LaSalle Street,  Number Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St. Brenner, 3 Progress St.   | Suite 814  ed or qualified to ectors: (If more to Suite 100, Edisc St. Suite 100, Edisc Suite 100, Edisc   | Middle Initial  Street 60604  ZIP Code to transact business: (Interpretation of the control of t | Cook                   | Suit #   County incorporation             | (A P.O. Box alone s not acceptable.)  On) |  |  |
| New I     | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William Director Frances                  | CT CORPORATION  First Name 208 S. LaSalle Street, Number Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to Suite 100, Edisc St. Suite 100, Edisc Suite 100, Edisc   | Middle Initial  Street 60604  ZIP Code to transact business: (Interpretation of the control of t | Cook                   | Suit #   County incorporation             | (A P.O. Box alone s not acceptable.)  On) |  |  |
| Nev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William Director Frances Director Frances | CT CORPORATION  First Name 208 S. LaSalle Street, Number Chicago  City  es in which it is admitted  No. & Street Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to Suite 100, Edisc St. Suite 100, Edisc Suite 100, Edisc   | Middle Initial  Street 60604  ZIP Code to transact business: (Interpretation of the control of t | Cook nclude state of i | Suit #   County Incorporation ers, attach | (A P.O. Box alone<br>s not acceptable.)   |  |  |
| Nev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William Director Frances                  | CT CORPORATION  First Name 208 S. LaSalle Street,  Number  Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to Suite 100, Edisc St. Suite 100, Edisc Suite 100, Edisc   | Middle Initial  Street 60604  ZIP Code to transact business: (Interpretation of the control of t | Cook nclude state of i | Suit #   County Incorporation ers, attach | (A P.O. Box alone s not acceptable.)  On) |  |  |
| Nev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William Director Frances Director Frances | CT CORPORATION  First Name 208 S. LaSalle Street,  Number  Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to suite 100, Edisc St. Suite S | Middle Initial  Street 60604  ZIP Code to transact business: (Interpretation of the control of t | Cook nclude state of i | Suit #   County Incorporation ers, attach | (A P.O. Box alone s not acceptable.)  On) |  |  |
| Nev       | Registered Agent: Registered Office: States and countrie v Jersey & Florida Name and address Name President William Secretary Frances Director William Director Frances Director Frances | CT CORPORATION  First Name 208 S. LaSalle Street,  Number  Chicago  City  es in which it is admitt  es of officers and direct  No. & Street  Brenner, 3 Progress St. ca Brenner, 3 Progress St.  | Suite 814  ed or qualified to ectors: (If more to suite 100, Edisc St. Suite S | Middle Initial  Street 60604  ZIP Code To transact business: (If than 3 directors and/or City on, NJ 08820 son, NJ 08820 son, NJ 08820 son, NJ 08820   | Cook nclude state of i | Suit #   County Incorporation ers, attach | (A P.O. Box alone s not acceptable.)  On) |  |  |

0412834074 Page: 2 of 3

## **UNOFFICIAL COPY**

7. The purpose or purposes for which it was organized which it proposes to pursue in the transaction of business in this state: (If not sufficient space to cover this point, add one or more sheets of this size)

Residential and commercial assembly of ready to assemble furniture. Notwithstanding the foregoing, the purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized to do business under the New Jersey Business Corporation Act and permitted under the Illinois Business Corporation Act.

| 8.  | Authoriza  | ed and issued shar  | ac.  |   |   |  |  |  |
|-----|--|---|--|---|---|--|--|--|
| _   | Class<br>mmon  | Series  | Par Value<br>NPV   | Number of Sha<br>Authorized<br>200                | ranbol of Gliates                                       |  |  |  |
|     |  | <b>⊘</b>  |  |   |   |  |  |  |
|     |  | 0   | (If m  | ore, attach list)                                 |   |  |  |  |
| 9.  | Paid-in C<br>("Paid-in   |   |  | l & Paid-in Surplus an                            | d is equal to the total of these accounts.)             |  |  |  |
| 10. | (b) Give corpo<br>(c) State<br>transa<br>(d) State   | an estimate of the ration for the follow ration for the follow the estimated total acted by it everywhathe estimated annuacted by it at or from | total value of all the proving year: total value of all the proving year that will be looking year that will be lookiness of the comporer for the following year business of the corporation places of business in | operty* of the cated in Illinois: ation to be ar: | \$ 25,000.00<br>\$ 0.00<br>\$ 600,000.00<br>\$ 5,000.00 |  |  |  |
| 11. | (a) Is the   | corporation transa  | his section must be co<br>cting business in this st<br>a) is yes, state the exact  | tate at this time? No                             | nmenced to transact business in Illinois:               |  |  |  |
| 12. | This application is accompanied by a certified copy of the articles of incorporation, as amended, duly authenticated, with the last ninety (90) days, by the proper officer of the state or country wherein the corporation is incorporated.                       |   |  |   |   |  |  |  |
| 13. | The undersigned corporation has caused this application to be signed by a duly authorized officer, who affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in <b>BLACK</b> (NK.)  National Assembly Services, Inc. |   |  |   |   |  |  |  |
|     |  | (Month & Day) (Any Authorized Offi William Brenner, Property (Print Name  | resident   |   | (Exact Name of Corporation)                             |  |  |  |

\* PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intangible, or mixed without qualifications.

Note 1: Payment in connection with this application must be in the form of a certified check, cashier's check, Illinois attorney or CPA's check or money order made payable to the "Secretary of State". The minimum fee due upon qualification is \$175. Any additional fees will be billed and must be paid before this application can be filed.

MAX 170

## **UNOFFICIAL COPY**

Attachment to Illinois

## **Officers & Directors**

1. Full Name:

Officer/Director:

Officer's Title:

**Business Address:** 

City:

State:

ZIP Code:

2. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City:

State:

ZIP Code:

William Brenner

Officer, Director

President

3 Progress St. Suite 100

Edison

NJ

08820

or: Of Colling Clerk's Office

