UNOFFICIAL COF 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

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."

This space for use by Secretary of State

FILED

JUN 17 2004

JESSE WHITE SECRETARY OF STATE

SUBMIT IN DUPLICATE!

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Date

Franchise Tax Filing Fee

Approved:

CORPORATE NAME: ART LOGISTICS, INC.

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

Initial Registered Agent: 2.

Initial Registered Office:

MAREK

First Name

1585

Number 1 DES PLAINES

ELLINWOOD STREET Street COOK County

Middle Initial

Suite 200 Suite #

60016 Zip Code

TOMCZYK

Last name

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.)

City

The transaction of any or all lawfull purposes for which corporations may be incorporated under the Illinois Busieness Corporation Act of 1983.

Paragraph 1: Authorized Shares, Issued Shares and Consideration Received:

Par Value per Share Class

Number of Shares Authorized

Number of Shares Proposed to be issued Consideration to be Received Therefor

COMMON \$1.00 1.000

1,000

,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:

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

Doc#: 0421706120

Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 08/04/2004 01:21 PM Pg: 1 of 2

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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: 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: OTHEF, PROVISIONS 7. OPTIONAL: Attach a per arate 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 inclority requirements, fixing a duration other than perpetual, etc. 8. NAME(S) & ADDRESS(ES) OF INCORPORATOR(S)

The undersigned incorporator(s) hereby ceclare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated	JUNE 1/2			
	(Month & Day)	Year		
	Signature and Name		Address	
1		1. 600 N. VILLA		
=	Signature ARKADIUSZ P. GRUSZKA	S*reet VILLA PARK,	IL	60181
	(Type or Print Name)	Gity/Town	State	ZIP Code
2.		2		
	Signature	Street	•	
_	(Type or Print Name)	City/Town	State	ZIP Code
3.		3	Ω	
	Signature	Street	0,,	
	(Type or Print Name)	City/Town	S.at a	ZIP Code

(Signatures must be in **BLACK INK** on original document. Carbon copy, photocopy or rubber stamp significures 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

 Paratment of Business Services Telephone (217) 782 0523 or 782 0523.

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Department of Business Services Telephone (217) 782-9522 or 782-9523

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