

UNOFFICIAL COPY

Form **LLC-5.5**

April 2007

Secretary of State **Jesse White**
Department of Business Services
Limited Liability Division
501 S. Second St., Rm. 351
Springfield, IL 62756
217-524-8008
www.cyberdriveillinois.com

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

Illinois Limited Liability Company Act Articles of Organization

SUBMIT IN DUPLICATE
Must be typewritten.

This space for use by Secretary of State.

Filing Fee: \$500

Approved: **PHS**

FILE # **02271281**

This space for use by Secretary of State.

FILED: 7/24/2007

JESSE WHITE

SECRETARY OF STATE

1. Limited Liability Company Name: 1910 N. LEAVITT, LLC



The LLC name must contain the words Limited Liability Company, L.L.C. or LLC and cannot contain the term Limited Partnership or L.P.

Doc#: **0720846045** Fee: **\$26.50**
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 07/27/2007 09:43 AM Pg: 1 of 2

2. Address of Principal Place of Business where records of the company will be kept (P.O. Box alone or c/o is unacceptable.) 1840 N. CLARK STREET, CHICAGO, ILLINOIS 60614

3. Articles of Organization effective on: (check one)

the filing date

a later date (not to exceed 60 days after the filing date): _____
Month, Day, Year

4. Registered Agent's Name and Registered Office Address:

Registered Agent: SMIGIELSKI & WATOR, P.C. C/O DARIUSZ T. WATOR
First Name Middle Initial Last Name

Registered Office: 10711 S. ROBERTS ROAD
(P.O. Box alone or c/o is unacceptable.) Number Street Suite #
PALOS HILLS, ILLINOIS 60465 City ZIP Code COOK County

5. Purpose(s) for which the Limited Liability Company is organized: (If more space is needed, attach additional sheets of this size.)

"The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act."
Purchase, maintenance, development and sale of the real estate located at 1910 N. Leavitt Street, Chicago, Illinois 60647.

6. Latest date, if any, upon which the company is to dissolve: _____
(Leave blank if duration is perpetual.) Month, Day, Year

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7. (OPTIONAL) Other provisions for the regulation of the internal affairs of the Company: (If more space is needed, attach additional sheets of this size.)

8. The Limited Liability Company: (Check either a or b below.)
a. is managed by the manager(s) (List names and business addresses.)

b. has management vested in the member(s) (List names and addresses.)

MARC DEVEREAUX
1840 N. CLARK STREET
CHICAGO, ILLINOIS 60614

EWA DEVEREAUX
1840 N. CLARK STREET
CHICAGO, ILLINOIS 60614

9. Name and Address of Organizer(s)

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated July 23 2007
Month & Day Year

1. [Signature]
Signature

MARC DEVEREAUX
Name (type or print)

Name if a Corporation or other Entity, and Title of Signer

2. [Signature]
Signature

EWA DEVEREAUX
Name (type or print)

Name if a Corporation or other Entity, and Title of Signer

1. 1840 N. CLARK STREET
Number Street

CHICAGO
City/Town

ILLINOIS 60614
State ZIP Code

2. 1840 N. CLARK STREET
Number Street

CHICAGO
City/Town

ILLINOIS 60614
State ZIP Code

Signatures must be in black ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.