

# UNOFFICIAL COPY

File Number 6062-475-5



Doc#: 0913934035 Fee: \$46.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 05/19/2009 09:41 AM Pg: 1 of 6

## State of Illinois Office of The Secretary of State

Whereas,

ARTICLES OF INCORPORATION OF  
SAR KRISHNA INC.

INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN  
FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE  
BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

Now Therefore, I, Jesse White, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, at the City of Springfield, this 11<sup>TH</sup> day of AUGUST A.D. 1999 and of the Independence of the United States the two hundred and 24<sup>TH</sup>.



*Jesse White*

Secretary of State

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**PAID**

AUG 11 1999

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

(Rev. Jan. 1995)  
**JESSE WHITE**  
 Secretary of State  
 Department of Business Services  
 Springfield, IL 62756

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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**

AUG 11 1999

JESSE WHITE  
 SECRETARY OF STATE

**SUBMIT IN DUPLICATE!**

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This space for use by Secretary of State

Date 8-11-99

Franchise Tax \$ 25.00  
 Filing Fee \$ 75.00  
 Approved: *Be* 100.00

1. CORPORATE NAME: SAI KRISHNA INC.

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

2. Initial Registered Agent: BAPATAH KOTHAPALLI  
First Name Middle Initial Last name

Initial Registered Office: 505 N DUNDEE AVE.  
Number Street Suite #  
ELGIN IL 60120 KANE  
City Zip Code County

3. 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.)

**THE TRANSACTION OF ANY OR ALL LAWFUL PURPOSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE ILLINOIS BUSINESS CORPORATION ACT OF 1983**

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
COMM	\$ NO PAR	10,000	1,000	\$ 1,000
<b>TOTAL = \$ 1,000</b>				

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.)

6062-475-5

*8-10*

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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 4-14- 19 99

Signature and Name	Address
1. <u>[Signature]</u> Signature <u>BAPAI AH KOTHAPALLI</u> (Type or Print Name)	1. <u>1008 HAWTHORNE LN.</u> Street <u>HANOVER PK. IL. 60103</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

# UNOFFICIAL COPY

FORM **BCA 5.10/5.20** (rev. Dec. 2003)  
**STATEMENT OF CHANGE OF  
REGISTERED AGENT AND/OR  
REGISTERED OFFICE**  
Business Corporation Act



Jesse White, Secretary of State  
Department of Business Services  
501 S. Second St., Rm. 328  
Springfield, IL 62756  
217-782-7808  
www.cyberdriveillinois.com

**FILED**

**APR 13 2009**

**JESSE WHITE  
SECRETARY OF STATE**

Remit payment in the form of a  
check or money order payable  
to Secretary of State

File # 6062-475-5 Filing Fee: \$25 Approved: JWB

Submit in duplicate Type or Print clearly in black ink Do not write above this line

1. Corporate Name: Sai Krishna Inc.
2. State or Country of Incorporation: Illinois
3. Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):

Registered Agent: Bapaiah Kothapalli

First Name	Middle Name	Last Name
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Registered Office: 505 N. Dundee Avenue

Number	Street	Suite # (P.O. Box alone is unacceptable)
<u>Elgin, IL 60120</u>		<u>Kane</u>
City	ZIP Code	County

4. Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):

Registered Agent: Bapaiah Kothapalli

First Name	Middle Name	Last Name
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Registered Office: 1264 Hunters Ridge

Number	Street	Suite # (P.O. Box alone is unacceptable)
<u>Hoffman Estates, IL 60192</u>		<u>Cook</u>
City	ZIP Code	County

5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
6. The above change was authorized by: ("X" one box only)
  - Resolution duly adopted by the board of directors. (See Note 5 on reverse.)
  - Action of the registered agent. (See Note 6 on reverse.)

**P A I D**  
APR 14 2009

**DEPARTMENT OF  
BUSINESS SERVICES**

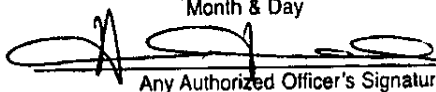


SEE REVERSE FOR SIGNATURE(S).

**UNOFFICIAL COPY****7. If authorized by the board of directors, sign here. (See Note 5 below.)**

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated March 26, 2009 Sai Krishna, Inc.  
Month & Day Year Exact Name of Corporation

  
 Any Authorized Officer's Signature

Bapaiah Kothapalli, President  
 Name and Title (type or print)

**If change of registered office by registered agent, sign here. (See Note 6 below.)**

The undersigned, under penalties of perjury, affirms that the facts stated herein are true and correct.

Dated \_\_\_\_\_, \_\_\_\_\_  
Month & Day Year Signature of Registered Agent of Record

\_\_\_\_\_  
 Name (type or print)  
 If Registered Agent is a corporation,  
 Name and Title of officer who is signing on its behalf.

**NOTES**

1. The registered office may, but need not be, the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2. The registered office must include a street or road address (P.O. Box alone is unacceptable).
3. A corporation cannot act as its own registered agent.
4. If the registered office is changed from one county to another, the corporation must file with the Recorder of Deeds of the new county a certified copy of the Articles of Incorporation and a certified copy of the Statement of Change of Registered Office. Such certified copies may be obtained ONLY from the Secretary of State.
5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must be signed by a duly authorized officer.
6. The registered agent may report a change of the registered office of the corporation for which he/she is a registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.

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File Number

6062-475-5



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

THE FOREGOING AND HERETO ATTACHED IS A TRUE AND CORRECT COPY, CONSISTING OF 5 PAGES, AS TAKEN FROM THE ORIGINAL ON FILE IN THIS OFFICE FOR SAI KRISHNA INC..\*\*\*\*\*



**In Testimony Whereof,** I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 24TH day of APRIL A.D. 2009 .

*Jesse White*

Authentication #: 0911400431

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE