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THE THE APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN THIS STATE OF

A. MAGNIN, INC.

DELAWARE INCORPORATED UNDER THE LAWS OF THE STATE OF HAS 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. JimEdgor, Secretary of State of the State of Allinois, 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 Costimony Illhereof, Theretoset my hand and exist to be affixed the Great Seal of the State of Illinois.

at the City of Springfield, this____ day of APRIL of the Independence of the United States the two hundred and

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BCA-13.15 (Rev. Jul. 1984)

Submit in Duplicate

Remit payment in Certified Check, Cashiers' Check or a Money Order, payable to "Secretary of State". DO NOT SEND CASH!

JIM EDGAR Secretary of State State of Illinois

APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN ILLINOIS**

					_
Tł	ile S	Space	For	Use	81

Date

License Fee

Franchise Tax Filing Fee

Penalties 1

Pur for	uant to the provisions of "The Business Corporation Act of 1983", the undersigned corporation hereby applies certificate of authority to transact business in the State of Illinois and submits the following statement.					
1.	The name of the corporation is I. MAGNIN, INC. (Shall contain the word "corporation"; "company"; "incorporated")					
	or limited : or shall contain an abbreviation of one of such words)					
	(To be completed only if the corporate name is not available) and, the name which it elects to assume for use in Illinois, hereby agreeing NOT to use its corporate name in the transaction of business in Illinois, is					
	State or Country Dute of					
2.	of Incorporation <u>Delaware</u> ; Incorporation <u>4/7/88</u> ; Period of Duration <u>Perpetual</u>					
3.	The address of its principal office, wherever located is <u>Union Square</u> , San Francisco,					
	California 94108					
	and the address of its principal office in Illinois is	,				
4	The name and address of its registered agent and its registered office in Ulinois are:	•				
	Pagislared Agent					
	Registered Agent					
	Registered Office					
	Number Street Suite # (A PO box alone is not acceptative)					
	Chicago 60604 Cook					
	City Zip Code County					
	The states and countries in which it is admitted or qualified to transact business are: being qualified	ł				

oncurrently herewith in the States of California, Arizona, Oregon, Washington and

The names and respective residential addresses of its officers and directors are: 6.

Maryland.

		No. & Street	City	State	Zip
President	Mark S. Handler	142 East 71st Street	New Yo	ork, N.Y.	10021
Secretary	Marvin Fenster	535 East 86th Street	New Yo	ork, N.Y.	10028
Director	Donald Eugene	60 Florida Hill Road	Ridge	field, Ct.	06877
Director	Marvin Fenster	535 East 86th Street	New Yo	ork, N.Y.	10028
Director	Edward S. Finkelste	in Milton Road		ield, Ct.	
Director	Mark S. Handler	142 East 71st Street	New Yo	ork, N.Y.	10021
· 573 - 4. IST.SEC.	/10/86) Eleanore McGuire	1896 Suydam Street	Ridgew	ood, N.Y.	11385

(ILL. Eleanore McGuire ASSIST.SEC.

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7. The purpose or purposes for which it is organized and which it proposes to pursue in the transaction of business in this State are:

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

To engage in any lawful act or activity for which corporations may be authorized under the General Coporation Law of the State of Delaware and permitted under the Illinois Business Corporation Act.

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8. The number of shares which it is authorized to issue and which it has issued are:

				Number of Shares	Number of Shares
	_	Class	• Par Value	Authorized	Issued
		Common Stock	\$.01	1,000	<u>100</u>
		<u>.,</u>			
		declaration as to a par value is lesired, indicate invali	optional, unless the artic	iles of incorporation make a decl	aration. When no reference to par value
9.	The	amount of paid-in capital*	• is	\$	1.00
• •	Paid in	Capital Treplace) the terms State	ad Capital & Paid-in Surp	lus and is equal to the total of th	ese accounts
		70_			
		Q _A	(COMPLETE EITHE	R #10 or #11 below)	
10.	רי	The cornoration elects to	nav its license fees	and its franchise taxes o	n the basis of 100% of its
10.		d-in capital.			
11	(a)		total value of all th	e property of the corporat	ion for \$ 49,709,000
		the following year	0/		\$ 43,703,000
	(b)			e property of the corporat	ion for
		the following year that wil	I be located in Illi io	ois)	\$ 49,709,000
	(c)			o polation to be transacte	d by it
		everywhere for the follow	ing year	40	\$ 325,000
	(d)			corporanen to be transac	ted by
		it at or from places of but	siness in the State of	of Illinois	\$ 55,000
10	INIT	ERROGATORIES	•	()	
12	HNC	ENNOGAIONIES		(Q ₄	A
	• (a)	To what office or offices v	vill all contracts with	n the corporation be forma	rided for final acceptance?
		Not expected t	o be Illinois.		2)
	(b)	The number of shares of	all classes owned b	y residents of Illinois is:	None
	(0)	The number of shares of	all classes owned by	v non-residents of Illinois i	s: 100
	(c)	The number or situates of	i Classes Office D	y non-residents or minere	0. 100
	(d)	Is the corpolation transac	ting business in this	State at this time?	No
	(e)	If your answer is in the at	firmative, state the	exact date on which it co-	mmenced to transact business
	(5)	in Illinois:	The state of the s		
13.	This	application is accompanied	by a copy of the art	licles of incorporation, as a	mended, duly authenticated by
	the p	proper officer of the State of	Country wherein it i	s incorporated, which cert	fication is not more than ninety

- PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intengible, or mixed without qualifications.
- *** When the response to #12(a) lists ONLY an Illinois address, then the total business as reflected in #11(c) is also considered to be an Illinois business for the purpose of computing the Illinois allocation factor. By signing this application, the corporation affirms that it is aware that the amount of paid-in capital, and consequently the amount of ticense fees and tranchise taxes, may be proportionately higher due to the Illinois address shown under #12(a)

(90) days old

NOFFICIA

The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirm, under penalties of perjury, that the facts stated herein are true. Dated MAGNIN 19 attested by by (Signature of 4 Senior Bresident Eleanore McGuire, Assistant Secretary Senior Vice President Marvin Fenster, (Type or Print Name and Title) (Type or Print Name and Title) Stopperty Ox Cook Colling \$15.00 #4444 TRAN 2111 04/28/88 14:47:00 #8208 # D *-88-178994 COOK COUNTY RECORDER DEPT-01 RECORDING DESK 88-178994 BOX 170 Filing Fee \$75.00 plus applicable license fee ATT SOLD THE STATE OF AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS APPLICATION FOR CERTIFICATE Secretary of State Springfield, Illinois 62756 Telephone 217 — 782-6961 Corporation Department Form BCA-13.15 RETURN TO: and franchise tax

File No.

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