

UNOFFICIAL COPY

9/12/92
CMC #3241739
GNMA #4748

91292535

ASSIGNMENT OF MORTGAGE/SECURITY INSTRUMENT/DEED OF TRUST

KNOW ALL MEN BY THESE PRESENTS that Chemical Bank, for the consideration of One Dollar (\$1.00) received in full satisfaction of Chemical Mortgage Company, whose mailing address is 101 East Town Street, Columbus, OH 43215, does hereby sell, assign, transfer and set over unto the said Chemical Mortgage Company, its successors and assigns, a certain Mortgage Deed bearing the date the 12 day of April, 1990, executed and delivered to Chemical Bank by SMITH, DIANA and filed as document Number 90175955, of COOK County, Illinois, records on the 18 day of April, 1990, upon the following described real estate, situated and being in said County and State to-wit:

6242 S. TALMAN AVE., CHICAGO, IL 90000 TAXID 191B4260310000

Together with the promissory note secured thereby and referred to therein; and all sums of money due and to become due thereon.

IN WITNESS WHEREOF, Chemical Bank hereto sets its hand by Peter A. Smith, its Vice President and Ann M. Sheets, its Assistant Secretary, the 15th day of May, 1990

IN PRESENCE OF:

Sandy Jones
Sandy Jones

Peter A. Smith
By: Peter A. Smith
Its: Vice President

Donna E. Vest
Donna E. Vest

Ann M. Sheets
By: Ann M. Sheets
Its: Assistant Secretary

91292535

STATE OF OHIO

COUNTY OF FAIRFIELD

DEPT-01 RECORDING \$13.00
T#8888 TRAN 3765 06/18/91 13:19:00
#9098 #11 *71-292535
COOK COUNTY RECORDER

Before me, a Notary Public in and for said State of Ohio, personally appeared the above named Peter A. Smith, Vice President and Ann M. Sheets, Assistant Secretary, who acknowledged that they did sign the foregoing instrument and that the same is the free act and deed of said Corporation and the free act and deed of themselves personally and as such officers.

IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal, at Columbus, Ohio, this 15th day of May, 1990.

Kathy Kennedy
Notary Public

This instrument was prepared by:
Chemical Mortgage Company
101 East Town Street
Columbus, Ohio 43215



KATHY KENNEDY
Notary Public, State of Ohio
My commission expires 7-91

QCS-IL/AMS/ttp/3

* Land description

LOT 15 IN BLOCK 15 IN COBE AND Mc KINNON'S
63rd STREET AND CALIFORNIA AVENUE SUBDIVISION OF
THE WEST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 13 TOWNSHIP
38 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL
MERIDIAN IN COOK COUNTY, ILLINOIS.

91292535 (Illinois)

13.00

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Property of Cook County Clerk's Office

MATHY KENNEDY
County Public, State of Ohio
My commission expires 7-9-93



9129-535

01338932

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Form **BCA-2.10** ARTICLES OF INCORPORATION

(Rev. Jan. 1991)
George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-6961

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."

FILED
MAY 29 1991
GEORGE H. RYAN
SECRETARY OF STATE

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date 5 29 91
Franchise Tax \$ 2500
Filing Fee \$ 7500
Approved: C 100-00

1. CORPORATE NAME: Deri & Wilkes Associates, a Professional Corporation

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

2. Initial Registered Agent: Delano N. Wilkes
First Name Middle Initial Last name

Initial Registered Office: 3447 N. Lincoln Avenue,
Number Street Suite #
Chicago, IL 60657
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.)
To practice the profession of architects and engineers, rendering that type of professional service and services ancillary thereto. Professional services will be rendered from: 3447 N. Lincoln Avenue, Chicago, IL 60657

4. Paragraph 1: Authorized Shares, Issued Shares and Consideration Received: ~~01202581~~

Class	Par value per Share	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
common	\$ -0-	1000	100	\$1,000.00

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.)

all common stock with no par value

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5. **OPTIONAL:** (a) Number of directors constituting the initial board of directors of the corporation: 2
(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
Mario P. Deri	6707 N. Keokuk, Chicago, IL 60646
Delano A. Wilkes	23 Circle Drive, Dune Acres, Chesterton, IN 46304

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 May 3, 19 91.

Signature and Name	Address
1. <u>[Signature]</u> Signature Gordon A. Etzler (Type or Print Name)	1. <u>103 E. Lincolnway, P.O. Box 2357</u> Street Valparaiso, IN 46384-2357 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 ink on original document. Carbon copy, photocopy or rubber stamp signatures may only be used on confirmed 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 or 1 percent (\$1.50 per \$1,000) on the paid-in capital represented in this state with a minimum of \$25 and a maximum of \$1,000.000.
- 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 62764
Department of Business Services Telephone: (312) 782-4361