

Whereas,

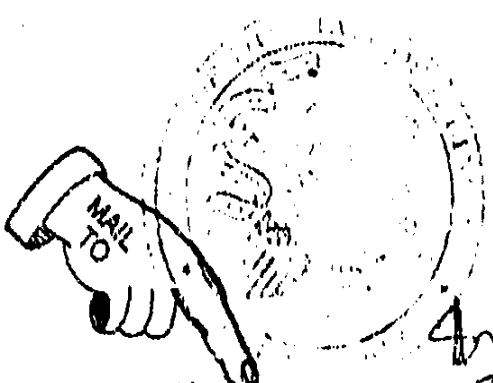
ARTICLES OF INCORPORATION OF
 MICHAELS TERRACE CONDOMINIUM ASSOCIATION
 INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN
 FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE
 GENERAL NOT FOR PROFIT CORPORATION ACT OF ILLINOIS, IN FORCE
 JANUARY 1, A.D. 1987.

92615245

Now Therefore, I, Jim Edgar, 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 have set my hand and seal to be affixed the Great Seal of the State of Illinois,*

at the City of Springfield, this _____ **7TH** _____
day of _____ **FEBRUARY** _____ *AD 19* **90** *and*
of the Independence of the United States
the two hundred and _____ **14TH** _____.



429.50 n'

Jim Edgar
 SECRETARY OF STATE

Please return to:
 Kathleen Cornell
 Greenberger Krauss & Tenenbaum
 180 N. LaSalle, #2700

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03/07/2018

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PC 1991 07-102.10
(Revised 6-89)

ARTICLES OF INCORPORATION

(Do Not Write in This Space)

SUBMIT IN DUPLICATE

Payment must be made by Certified Check, Cashiers' Check, Illinois Attorney's Check, Illinois C.P.A.'s Check or Money Order, payable to "Secretary of State."

DO NOT SEND CASH!

Date Paid 2-7-90

Filing Fee 800

Clerk [Signature]

TO: JIM EDGAR, Secretary of State

Pursuant to the provisions of "The General Not For Profit Corporation Act of 1980", the undersigned incorporator(s) hereby adopt the following Articles of Incorporation.

Article 1. The name of the corporation is: Michaela Terrace Condominium Association

Article 2. The name and address of the initial registered agent and registered office are:

Registered Agent Kenneth M. Bain
First Name Middle Name Last Name

Registered Office 180 North LaSalle Street, Suite 2800
Number Street (Do Not Use P.O. Box)

Chicago, IL 60601 Cook
City Zip Code County

Article 3. The first Board of Directors shall be 5 in number, their names and addresses being as follows:
(Not less than three)

Directors' Names	Number	Street	Address City	State
<u>Michael Cione</u>	<u>205 West Goethe</u>	<u>Chicago</u>	<u>Illinois</u>	
<u>Irene Michaels</u>	<u>205 West Goethe</u>	<u>Chicago</u>	<u>Illinois</u>	
<u>Frank Cione</u>	<u>205 West Goethe</u>	<u>Chicago</u>	<u>Illinois</u>	
<u>Alex Santi</u>	<u>205 West Goethe</u>	<u>Chicago</u>	<u>Illinois</u>	
<u>Joanna Dusablon</u>	<u>205 West Goethe</u>	<u>Chicago</u>	<u>Illinois</u>	

Article 4. The purposes for which the corporation is organized are:

Administration and operation of property owned on a condominium basis.

92615245

PAID

FEB 8 1990

Is this corporation a Condominium Association as established under the Condominium Property Act? Yes No (Check one)

Is this corporation a Cooperative Housing Corporation as defined in Section 216 of the Internal Revenue Code of 1954? Yes No (Check one)

Is this a Homeowner's Association which administers a common-interest community as defined in subsection (c) of Section 9-102 of the Code of Civil Procedure? Yes No

Article 5. Other provisions (please use separate page):

5583-456-3

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9 2 6 1 5 2 4 5

NAMES & ADDRESSES OF INCORPORATORS

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

Dated 1/17, 1990.

Signatures and Names		Post Office Address		
1.	<u>Michael Cione</u> Signature <u>Michael Cione</u> Name (please print)	1.	<u>205 West Goethe Street</u> Street <u>Chicago, Illinois 60610</u> City/Town State Zip	
2.	_____ Signature _____ Name (please print)	2.	_____ Street _____ City/Town State Zip	
3.	_____ Signature _____ Name (please print)	3.	_____ Street _____ City/Town State Zip	
4.	_____ Signature _____ Name (please print)	4.	_____ Street _____ City/Town State Zip	
5.	_____ Signature _____ Name (please print)	5.	_____ Street _____ City/Town State Zip	

(Signatures must be in ink on original document. Carbon copy, wax or rubber stamps signatures may only be used on the true copy.)

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 an Assistant Secretary.

The registered agent cannot be the corporation itself.

The registered agent may be an individual, resident in this State, or a domestic or foreign corporation, authorized to act as a registered agent.

The registered office may be, but need not be, the same as its principal office.

A corporation which is to function as a club, as defined in Section 1-3.24 of the "Liquor Control Act" of 1934, must insert in its purpose clause a statement that it will comply with the State and local laws and ordinances relating to alcoholic liquors.

FOR INSERTS - USE WHITE PAPER - SIZE 8 1/2" x 11"

92615245

File #

Form NP-102.10

ARTICLES OF INCORPORATION

under the

GENERAL NOT FOR PROFIT

CORPORATION ACT

of

FILED

FEB 7 1990

Illinois Secretary of State

SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
CORPORATION DIVISION
SPRINGFIELD, ILLINOIS 62766
TELEPHONE (217) 782-6961

(These Articles Must Be Executed and Filed in Duplicate)

Filing Fee \$25

C-1079

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ANNUAL REPORT
 (GENERAL NOT FOR PROFIT CORPORATION ACT)
 SECRETARY OF STATE OF ILLINOIS

FILE NO: 5583-45-63

2-1-92

DO NOT WRITE IN THIS SPACE

Annual Report Filing Fee \$ 8.00
 Annual Report with Change of Agent or Office \$10.00

X

FILED

JUL 10 1992

GEORGE H. RYAN
 SECRETARY OF STATE

1.) Michael's Terrace Condominium Association
 KENNETH SAIN
 180 North LaSalle Street
 Chicago, Illinois 60601

2.) CHANGES ONLY. Registered Agent Norman Geln
 Registered Office 180 North LaSalle Street, Suite 2700
 City, County, IL Zip Code Chicago, Illinois 60601

c/b

The above change was duly authorized by resolution of the board of directors. The address of the registered office and the address of the office of the registered agent, as changed, will be identical. THE ADDRESS OF THE REGISTERED OFFICE MUST INCLUDE A STREET NUMBER. A P. O. BOX MAY ONLY BE USED IN ADDITION THERETO.

3.) The above corporation organized under the laws of the state of Illinois, pursuant to the provisions of "The General Not for Profit Corporation Act" of the State of Illinois, hereby makes the following report:

4.) The names and respective addresses of its officers and directors are:

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
Frank Lakofka	Director/President	770 West Dundee Road	Arlington Heights	IL	60004-159
Inge Norvall	Director/Secretary	770 West Dundee Road	Arlington Heights	IL	60004-159
	Treasurer				
Steven Lippa	Director	770 West Dundee Road	Arlington Heights	IL	60004-159
Joseph Edwards	Director	770 West Dundee Road	Arlington Heights	IL	60004-159
Barbara Kotowicz	Director	6258 W. Harry Street	Chicago	IL	60634

NOTE: List all directors above or list them on an additional sheet: Illinois corporations must have three directors.

5.) The following is a brief statement of the character of the affairs which the corporation is actually conducting:
 Administration and operation of property owned on a condominium basis.

6.) Is the corporation a Condominium Association as established under the Condominium Property Act?

Yes No (Check One)

Is this corporation a Cooperative Housing Corporation defined in Section 216 of the Internal Revenue Code of 1954?

Yes No (Check one)

Is this a Homeowner's Association which administers a common-interest community as defined in subsection (a) of Section 9-102 of the Code of Civil Procedure?

Yes No (Check one)

7.) If a foreign corporation, the address of its principal office in the state of its incorporation is: N/A

92615245

(Number and Street)

(State or Country)

(Please read reverse side of this report before signing below)

BY Frank Lakofka
 (Authorized Officer's Signature)

INCIDENTAL 6/13/92
 (Title) (Date)

Under the penalty of perjury and as an authorized officer I declare that the enclosed report is true and correct to the best of my knowledge and belief and is in accordance with the provisions of the General Not for Profit Corporation Act and is not intended to defraud or to circumvent the law.

ITEM 8 MUST BE SIGNED

UNOFFICIAL COPY

EXPEDITED
SECRETARY OF STATE

AUG 17 1992

EXP. FEES 25.00
COPY - CERT. 10.00

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92615245

STATE OF ILLINOIS
Office of the Secretary of State
I hereby certify that this is a true and
correct copy, consisting of Two
pages, as taken from the original on file in
this office.

George H. Ryan

George H. Ryan
Secretary of State

DATED: August 17, 1992

BY: Barbara [Signature]



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