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File Number

3585-186-9

04811864



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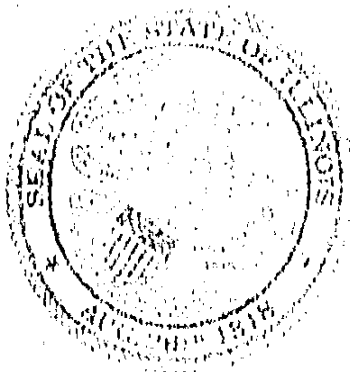
DEPT-01 RECORDING \$23.50
 T84666 TRAM 6872 09/16/94 14140100
 48554 LC # -94-811864
 COOK COUNTY RECORDER

Whereas, THE REINSTATEMENT OF
 DAVID C FLEMMING, S.C.
 INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS 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.

04811864

*Now Therefore, I, George H. Ryan, 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 26TH
 day of AUGUST A.D. 1994 and
 of the Independence of the United States
 the two hundred and 19TH



George H. Ryan 23⁵⁰
 SECRETARY OF STATE 644
 25

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08.15
09:00 AM
08.15 AM

Form **BCA-12.45/13.60**

APPLICATION FOR REINSTATEMENT
of
DOMESTIC OR FOREIGN CORPORATIONS

(Rev. Jan. 1991)

File # 56 85-786-7

George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756

FILED

SUBMIT IN DUPLICATE

AUG 26 1994

This space for use by
Secretary of State

Date 8-26-94

Filing Fee \$ 100.00

Approved: J. J.

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."

GEORGE H. RYAN
SECRETARY OF STATE

1. (a) Corporate name as of the date of issuance of the certificate of dissolution or revocation: David C. Flemming, S.C.
- (b) Corporate name as changed: _____ (Note 1)
- (c) If a foreign corporation having a certificate of authority under an assumed corporate name restriction, the assumed corporate name: _____ (Note 2)

2. State of Incorporation: Illinois

3. Date that the certificate of dissolution or revocation was issued: 11-1-93

4. Name and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: (Note 3) NOTICE! Completion of Item #4 does not constitute a registered agent or office change. See note #3 on back of this form.

Registered Agent
MAIL TO
Registered Office

<u>David</u>	<u>C.</u>	<u>Flemming</u>
<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
<u>6223 N. McClellan</u>	<u>Chicago-IL</u>	<u>60646</u>
<small>Number</small>	<small>Street</small>	<small>Suite # (A.P.C. Post office is not acceptable)</small>
<u>Chicago</u>	<u>60646</u>	<u>Cook</u>
<small>City</small>	<small>Zip Code</small>	<small>County</small>

5. This application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, license fee and penalties required.

6. The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true.

Dated August 25, 19 94 by David C. Flemming, S.C.

(Exact Name of Corporation)

attested by _____

(Signature of Secretary or Assistant Secretary)

by [Signature]

(Signature of President or Vice President)

(Type or Print Name and Title)

David C. Flemming
(Type or Print Name and Title)

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FILED

AUG 26 1994

GEORGE H. RYAN
SECRETARY OF STATE

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