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State of Allinois. Office of

The Secretary of State

Whereas,

ARTICLES OF INCORPORATION OF ENC CORPORATION

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

95503407

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

Teorge H Ryan

Secretary of State 265



C-212.1

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Property of Cook County Clerk's Office 95503407

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ARTICLES OF INCORPORATION

95503407

(Rev. Jan. 1991)

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

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

APR 2 5 1995

GEORGE H. RYAN SECRETARY OF STATE

EHC Corporation

SUBMIT IN DUPLICATE!

This space for use by Secrotory of State

25-Date

Franchise Tax Filing Fee

Approvod:

	1.()AP()BLA(P, ABM)
1.	COHPORATE NAME.
	the second secon
	(The corporate name must contain it a word "corporation", "company," "incorporated," "limited" or an abbreviation thereof.)
_	
	Ldurae Day

Initial Registered Agent: 2.

Initial Registered Office:

Middle Initial Last name First Nr.me 8543 S. 171st Place Suito # Number Streat Tinley Park 60477 Cook Zip Code County City

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 lize).

The transaction of any or all lawful purposes for which coporations my be incorporated under the Illinois Business Corporation Act of 1983. 16745C

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 releived Therefor
Common	s N/A	1000	100	\$1,000
				

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.)

5. OPTIONAL:	(a) Number of directors constituting the initial board of directors of	PY The corporation	r:2
	(b) Names and addresses of the persons who are to serve as dir shareholders or until their successors are elected and qualify:		
	Name to Residential Address		
	Edward Fox 8543 W. 177st Place, Tinley	Park, IL	60477
	Glen Williamson 9526 S. Höman Avenue, Everg	reen Park,	11. 60642
6. OPTIONAL:	(a) It is estimated that the value of all properly to be owned by the		
	corporation for the following year wherever ideated 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') 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 PF QUISIONS		
T, OF HONAL,	Attach a separate sheet of this size for any other provision to the incorporation, e.g., authorizing preemptive rights, denying cumula affairs, voting majority requirements, fixing a duration other than personal content of the cont	tive voting, reg	
8.	NAME(S) & ADURESS(ES) OF INCORPORATOR(S)	
The undersign	ned incorporator(s) hereby declare(s), under penalties of perjury, that	the statements	s made in the foregoing
	poration are true.		
,	4-21 95		
Dated	197		95503407
5/	Signature and Nathrie	Address	100407
1. Signature	1 8543 W. 171 Stroot	St Fince	
Edward	in the second se	, 11. 60477	
(Type or I	Print Name) City/Town	State	Zip Code
2.	الله الله الله الله الله الله الله الله	<u>m Avenue</u>	
L‴Sigñature CLas U	Street illiamson Evergreen P.	urk (11 60)	642
	illiamson Evergreen Porm Name) City/Town	State	Zip Codo
3	3		·
Signature	Street	9/5	?•
(Type or F	rint Name) City/Town	State	Zip Code
(Signatures must be	in ink on original document. Carbon copy, photocopy or rubber stamp signatures ma ation acts as incorporator, the name of the corporation and the state of incorp	ly only be used on	coror ned copies.)
shall be by its pres	sident of vice president and verified by him, and attested by its secretary or a	assistant secreta	ry.
		الاستان والمستان	المستمول المستمر المستمر المستمول المست
	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 filling fee is \$75.
- The minimum total due (franchise tax + filling 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 lees if necessary.

Illinois Secretary of State
Department of Business Services

Springfield, IL 62756
Telephone (21, 262-9522
MAN 623
TO

Ipoma + Associates 9742 S. Roberts Rd Palos Hills, IL 60465