#### **UNOFFICIAL COPY**

File Number

5895-499-3

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DEPT-OI RECORDING

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- #3537 # BJ \*-96-561216
- . CODK COUNTY RECORDER

# State of Allinois Office of The Secretary of State

Whereas,

ARTICLES OF INCORPORATION OF
A.F. COMPANY CONTRACTORS

INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE 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, George H. Ryan, Secretary of State of the State of the Illinois, by virtue of the powers vested in me by law, do hereby issue of this certificate and attach hereto a copy of the Application of the first 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 <sup>12TH</sup> day of <sup>JULY</sup> A.D. 19 <sup>96</sup> and of

the Independence of the United States the two

hundred and 218T

Scorge 4 Ryan

Secretary of State

25 g

C-212.2

## UNOFFICIAL COPY

3121.600p

Property of Coof County Clark's Office

twap (= p):

## 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, lilinois attorney's check, lilinois C.P.A's check or money order, payable to "Secretary of State."

#### FILED

JUL 12 1996

GEORGE H. RYAN SECRETARY OF STATE SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date 142-46

Franchise Tax \$ 25.00

Filing Fee \$ 75.00

Approved:

(00,00

1. CORPOPATE NAME: A.F. Company Contractors

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



Michael	J.	Kedzie
Fir)t 'jame	Middle Initial	Last name
One	North LaSalle Stree	t Suite 2200
Number	Street	Suite #
Chicago	60602	Cook
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.)

The transaction of any or all lawful business for which corporations may be incorporated under the Business Act of 1983, as amended.

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

Par Value per Share Number of Shares Number of Shares Proposed to be Issued Received Therefor Common \$ NPV 10,000 1,000 \$ 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.)

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5. OPTIONAL:	(a) Number of directors constituting the initial board of directors of the corporation:     (b) Names and addresses of the persons who are to serve as directors until the first annual shareholders or until their successors are elected and qualify:     Name     Residential Address					
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:  (c) 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 sepa at a sheet of this Incorporation, e.g., authorizing praffairs, voting majority requirement	reemptive rights.	denying cumula	tive voting, regulatin		
Articles of Incorp  Dated		9 <u>76</u> .	233 Nort	Address h Melvina  Illinois 606		
(Type or Pi 2 Signature		2.	City/Yourn Street	State	Zip Code	
(Type of Pri 3	ini Name)	3.	City/Town Street	Siale	Zip Code	
NOTE: If a corporati	nt Name) In this on original document, Carbon copy, plant as incorporator, the name of the dent or Vice President and verified by	he corporation and	I the state of incorp	oration shall be shown		
1.7	F	EE SCHEDUL	 .E			
state, with a m  The liling fee i	chise tax is assessed at the rate of 15/ ninimum of \$25. is \$75. In total due (franchise tax + filling fee) is	,	1.50 per \$1,000) or	n the paid-in capital rep	resented in this	
	the Consideration to be Received as		does not exceed \$1	6,667)		

The Department of Business Services in Springfield will provide assistance in calculating the total fees if necessary.

782-9523

Springfield, IL 62756

Telephone (217) 782-9522

C-162 13

Illinois Secretary of State

Department of Business Services