

UNOFFICIAL COPY

File Number 5871-886-6

96215103

DEPT-01 RECORDING \$25.50
T40003 TRAN 4763 03/20/96 16:20:00
\$6220 € LMI # - 96-215103
COOK COUNTY RECORDER

State of Illinois Office of The Secretary of State

Whereas, ARTICLES OF INCORPORATION OF
PIERIE'S II BAKERY, INC.

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.

96215103

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 14TH day of FEBRUARY A.D. 19 96 and of the Independence of the United States the two hundred and 20TH



George H. Ryan

Secretary of State

25
[Handwritten signature]

UNOFFICIAL COPY

Property of Cook County Clerk's Office

UNOFFICIAL COPY

Form **BCA-2.10**

ARTICLES OF INCORPORATION

(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

SUBMIT IN DUPLICATE!

FILED

FEB 14 1996

GEORGE H. RYAN
Secretary of State

This space for use by
Secretary of State

Date

544-86

Franchise Tax

\$ 25.00

Filing Fee

\$ 75.00

Approved:

✓ 100.00

1. CORPORATE NAME: PIERRE'S II BAKERY, INC.

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

2. Initial Registered Agent:	BRUCE	A.	DICKMAN
	First Name	Middle Initial	Last Name
Initial Registered Office:	154 NORTH LASALLE		2222
	Address	Street	Suite #
	CHICAGO	IL 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.)

96215103

THE TRANSACTION OF ANY AND ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS
MAY BE INCORPORATED UNDER THE ILLINOIS BUSINESS CORPORATION ACT.

4. 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 Received Therefor
Common	\$ No/PAR	1,000	100	\$ 1,000.00
<hr/>				
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.)

(over)

UNOFFICIAL COPY

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 meeting of shareholders or until their successors are elected and qualify:

Name _____

Residential Address _____

City, State, ZIP _____

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: 21/96, 19_____

Signature and Name

Signature

MARTINA MARINEZ

(Type or Print Name)

Signature

(Type or Print Name)

Signature

(Type or Print Name)

Address 96215103
1. 12429 S. Western

Street

Blue Island, IL 60406

Zip Code

2. Street

City/Town State

Zip Code

3. Street

City/Town State

Zip Code

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 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 of 1 percent (\$1.50 per \$1,000) on the paid-in capital represented in this state, with a minimum of \$25.
- 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
Department of Business Services

Springfield, IL 62756
Telephone (217) 782-9522
782-9523