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5836-516-5 File Number

97592874

State of Allinois of The Secretary of State

Whereas, APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT

PERFECTION BAKERIES, INC. INCORPORATED UNDER THE LAWS OF THE STATE OF INDIANA 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.

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 Cestimony 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 _ day of ____ ____ A.D. 19 95 the Independence of the United States the two hundred and 19TH

C-212.1

Form BCA-13.15 İRev. Jan. 1995]

George H. Ryan Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 702-1834

Payment must be made by certified check cashler's check, illinois attorney's check, !llincis C.P.A.'s check or money order. payable to 'Secretary of State.'

7 X APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS

BCA-13.18

space for the bu Secretar of State PAID

MAY 3 1 1995

GEORGE H. RYAN SECRETARY OF STATE SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date 2 3/ 45

License Fee

Franchise Tax

Filing Fee

Penalties

tem 1.0 HU;

Approved: // K

\$2761 \$75 00

10208

,0	ORPORATE A PARE PE	rection baser	163, (1,0,	
ı	Сотрівів item 1 (b) only-ii l'as ⇔	orporale name is not avail	able in this state.)	
10	(By electing this assumed national formula in the state of the state o	e ne, the corporation nore		rporate name in the
(a	State or Country of Incorpor	ation: Cdiana	,	
(t				
(0	D	petual		
(a	Address of the principal office	ce, wherever located:	(if none, so state	e)
	120 Penta Street		W. Braniev	UNIEA
	Fort Wayne, IN 4	v802	Chamiaion, II.	61820
			0.	
-			Q	
 	ame and address of the redister	ed agent and registered of	ofice in Illinois.	
- N	iame and address of the register	•	o fice in filinois.	Mintooth
	iame and address of the register Registered Agent	•	o fice in Illinois. Middle Name	Mintooth Last Name
N	Registered Agent	First Name	Middle Name	The state of the s
N	•	Matt	Middle Name	The state of the s
N	Registered Agent	Hatt First Name 706 W. Bradto	Middle Name	Last Name Suite #
N	Registered Agent	First Name 706 W. Bradit	Middle Name ev, Unit A Street	Last Name
	Registered Agent	Matt First Name 706 W. Bradio Number Chambaign City	Middle Name ev, Unit A Street 61820 Zip Code	Suite # Champaign County
S	Registered Agent	First Name 706 W. Bradto Number Chambaian City admitted or qualified to tr	Middle Name ev, Unit A Street 61820 Zip Code	Suite # Champaign County
Si	Registered Agent Registered Office Iates and countries in which it is	First Name 706 W. Bradit Number Chambaian City admitted or qualified to tr	Middle Name ev, Unit A Street 61820 Zip Code	Champaign County ate of incorporation)
Si	Registered Agent Registered Office tates and countries in which it is Indiana, Michigan, O	First Name 706 W. Bradit Number Chambaian City admitted or qualified to tr	Middle Name ev, Unit A Street 61820 Zip Code ansact business: (Include st	Champaign County are of incorporation)

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7	Purpose or purposes proposed to be pursued in transacting business in this state:
	(If not sufficient space to cover this point, and one or more sheets of this are it

Sell bakery products to groceries, institutions, and

- U	ized and issued shares: Series	Par Value	Number of Shares Authorized	Number of Shares Issued
Common Jenes		No Par	100.000	71,849
9. Pa	id-in Capital: \$13,5	359		
(*P	aid-in Capita!" কেনেক ভেও the	terms Stated Capital &	Paid-in Surplus and is equal	to the total of these accounts)
ا (a)	Give an estimate of the corporation for the follow			7,J00,000
(b)	Give an estimate of the corporation for the follow			10,000
(č)	State the estimated total transacted by it everywh			0,000,000
(d)	Sizh the estimated and transacted by it at or troublinois:			200,000
1 Into	errogatones: (Important – tr	nis section must be com	pleted.	President
" (a)	Office or offices to which	all contracts with the co	orporation are formarded for fi	350 Pearl Stree nalacceptance: Pt. Wayne,
(b) (c)			ents of It'inois: -0 esidents of Illinois: 7%, 8	46802
(d)				67
(e)				to transact business in Illinois. 4
2 Th				mel ded, duly authenticated, within
	the last ninety (90) days.	by the proper "per of	the state or country wherein	the corporation is incorporated.
				zad officers, each of whom affirms,
ប្រា	der penalties of perjury, tha	it the facts stated herein	are true. (All signatures mus	pe iu <u>BITVCK IN</u> Y.)
	led April 14.	. 1995	Perfection B	America. Inc.
Da			(Exact Mai	me of Corporation)
	usled by	111	by Alace	1 72
	·	retary or Assistant Secre	etary) (Signature of Pre	sident or Vice President)
	(Signature of Seci	retary or Assistant Secretar 111er, Secretar Int Name and Title)	ry <u>Michael C.</u>	Ray, V.P. Human Resourint Name and Title)

or mixed without qualifications.

When the response to #11(a) lists QNLY an Illinois address, there is a considered to be Illinois business for the purpose of computing the Illinois allocation factor. By signing this application, the corporation affirms that it is aware that the amount of paid-in capital, and consequently the amount of license fees and franchise taxes, may be proport phately higher due to the Illinois address shown under #11(a)

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Property of Cook County Clerk's Office

UNOFFICIAL COPY 97592574 Page 1 of

File # FS8365165

Form BCA-5.10 NFP-105.10

(Rev. April 1995)

George H. Ryan 10,00 Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647 http://www.sos.state.il.us

STATEMENT OF **CHANGE** OF REGISTERED AGENT **AND/OR REGISTERED OFFICE**

97R14843

DOC# 97 R 14847 CHAMPAIGN COUNTY, ILL

PM 2 10 '97 JUN 30

Donbina a. Droca REGURDER

FILED

JUN 0 3 1897

GEORGE H. RYAN SECRETALY OF STATE This space for use by Secretary of State

Suite No. (A P.O. Box alcne is not acceptable)

60604

ZIP Code

S 5

Approved:

Date

Remit payment in check or money order, payable to "Secretary of State."

1.	CORPORATE NAME:	Perfect:	on Bakeries, 1-	Enc.
2.	STATE OR COUNTRY O	F INCORPORATION	ON: <u>Indiana</u>	<u>O, ,</u>
3.	Name and address of the of the Secretary of State ((before change) :	nd registered office as they app	C
	Registered Agent	Matt		Muntooth
	•	First Name	Midcle Name	Last Name
	Registered Office	706 W	Bradley, uni+ A	
	3	Number St	r eet Suite No. (A P.U. Bo	x alone is not acceptable)
		Champois	61820	Champaign
	·	City	ZIP Code	County
4.	Name and address of the	registered agent a	nd registered office shall be (afte	
	Registered Agent.		, CT Corpor	ation System
	i iogiototo rigotti.	First Name	Middle Name	Last Name
	Registered Office	208 5, 643	Salle	

Street

Number

City

Chicago

UNOFFICIAL COPY (Section 1) 7 14847

5.	The address of the registered office and the address of the business office of the registered agent, as changed,
	will be identical.

6.	The above change was	authorized by:	("X" one box onl	y)
		*		

a.

By resolution duly adopted by the board of directors.

(Note 5)

b. By action of the registered agent. (Note 6)

NOTE: When the registered agent changes, the signatures of both president and secretary are required.

7. (If authorized by the hoard of directors, sign here. See Note 5)

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 Grant 39 19,97 Perfection Bakenies Inc.

(Exact Name of Corporation)

(Signature of President or Vice President)

Jakenies Secretary)

(Type or Print Name and Title)

(Type or Print Name and Title)

(If change of registered office by registered agent, sign here. See Note 6)

The undersigned, under penalties of perjury, affirms that the facts stated herein are true.

NOTES

- 1. The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street or road address; a post office box number alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of registered agent must be by resolution adopted by the board of directors. This skitement must then be signed by the president (or vice-president) and by the secretary (or an assistant secretary).
- 6. The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent.

Ret. to.: Judy Siegel

CHARLE Perfection Bakerics, INC

350 Pearl St.

Tt. Wayne, IN 46802