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\$846/0196 10 001 Page 1 of 3 1998-04-13 15:39:50 Book County Recorder (55.00

File Number 5987-834-4

State of Illinois Office of The Secretary of State

Whiles, application for certificate of authority to transact business in this state of

FLAMERTY & COLLINS, 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 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 $_{30TH}$ day of $_{MARCH}$ A.D. 19 $_{98}$ and of the Independence of the United States the two hundred and $_{22ND}$

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Secretary of State

	BCA-13.15 v. Jan. 1995)	OFFICIAL COF APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS	98289417 Fage Led SUBMIT IN DUPLICATED			
Dep Spri Tele	rge H. Ryan, Secretary of State artment of Business Services ngfield, IL. 62756 phone (217) 782-1834 //www.sos.state.il.us	This space for use by Secretary of State	This space for use by Secretary of State Date 3-30-98 License Fee \$			
cer Illin C.F	yment must be made by tifled check, cashier's check, lois attorney's check, Illinois P.A.'s check or money order, yable to "Secretary of State."	MAR 30 1998 GEORGE H. RYAN SECRETARY OF STATE	Franchise Tax \$ 35. Filing Fee \$ 75. Penaities \$ Approved: Kr / 10			
1.	(a) CORPORATE NAME: Flaherty & Collins, Inc. (Complete item 1 (b) only if the corporate name is not available in this state.) (b) ASSUMED CORPORATE NAME: (By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the transaction of business in diffusions. Form BCA 4.15 is attached.)					
2.	(a) State or Country of Incorp(b) Date of Incorporation:(c) Period of Duration:					
3.	(a) Address of the principal of 8910 Purdue R Suite 350 Indpls IN	ill none s	ipal office in Illinois: io state)			
E.	Name and address of the regis Registered Agent XPERGISER Crisco MAR 3 0 1393	First Name Middle Name 957 E 100 th PL Number Street Chicago TL 60633	Morris JR Last Name Suite # Cork County			
\$1 5.	Indiana	is admitted or qualified to transact business: (Inclu	<u></u>			
6.	Name Name President Jenn K. C. Secretary N/A Director (E0) Quid Director (E0) Brain Director	No. & Street Collins 200 Yorkshire Lic No Flahenty 10467 Holliday E. Or	City State Zip blesville IN 46060 INOPLS IN 46260 INOPLS IN 46348			

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Perform properly monagement services for multifamily, cooperative housing and commercial office buildings							
8.At	uthorized Class	d and issued shares: Series	Par Value	Number of Shares Authorized	Number of Shares Issued		
	Com	nen	<u> </u>	2000	• 933 • 34		
9.	Paid-in Capital Suplaces the terms Stated Capital & Paid-in Surplus and is equal to the total of these accounts.)						
10.		ive an estimate of the orporation for the follow	total value of all the party year.	property of the	, 000		
	(b) Give an estimate of the total value of all the property of the corporation for the following vear that will be located in Illinois: \$ 5,000						
	(c) S	tate the estimated tot ansacted by it everywh	al business of the corere for the following ye	rporation to be s 1. 6	200,000		
	tra	tate the estimated ann ansacted by it at or fro inois:	nual business of the complaces of business	rporation to be in the State of s_30,	<u> </u>		
11.	Interrogatories: (Important – this section must be completed)						
	(b) No (c) No (d) Is	umber of shares of all c umber of shares of all c the corporation transat	esidents of Illinois, 103%				
12.	2. This application is accompanied by a certified copy of the articles of incorporation, as amended, duly authenticated, we the last ninety (90) days, by the proper officer of the state or country wherein the corporation is incorporated						
	The undersigned corporation has caused this statement to be signed by its duly authorized office is each of whom affir under penalties of perjury, that the facts stated herein are true. (All signatures must be in <u>BLACX INK.</u>)						
	Dated _	March 2	5 . 19 <u>98</u>	Flaherty (Exact.Name	E Collins, Inc		
•	attested		etary or Assistant Secre	etary) (Signerire of Presid	ent or Vice President)		
		David	M. Flaherty IN Name and Title)	Kanau K	Coilins		

When the response to #11(a) lists ONLY an Illinois address, then the total business as reflected in #10(c) is also 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 proportionately higher due to the Illinois address shown under #11(a).

C-171.9