1999-08-19 11:40:47

Cook County Recorder

File Number

6006-095-9

State of Illinois Office of The Secretary of State

Whereas,

UNCTEDS, ARTICLES OF INCORPORATION OF
PARTNERS PUMPING SERVICE, 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 ILIJNOIS, 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 couse to be

affixed the Great Seal of the State of Illinois, at the City of Springfield, this A.D. 19 day of JULY

the Independence of the United States the two

hundred and 23RD

Secretary of State

C-212.2

UNOFFICIAL COPSY94456PAID

For	BCA-2.10	ARTICLES OF IN	CORPORATION		.1111 2 8 1998	
eorg ecret	ev. Jan. 1995) e H. Ryan tary of State tment of Business Services field, IL 62756	This space for use by	ED	This spa	ace for use by	
ed chois a	ent must be made by certi- heck, cashier's check, Illi- attorney's check, Illinois 's check or money order, le to "Secretary of State."	GEORGE H. SECRETARY OI	RYAN	l Approved:	-98 x \$ 25,00 \$ 75,00 100.00	
	Ć.	PARTNERS PUMPING S	<i>V</i>			
(The corporate name musicon	ntain the word "corporation",	company," "incorporated,"	"timited" or an al	obreviation thereof.)	
2.	Initial Registered Agent: -	michael First Narae	D . Middle Initial	La	tler ast name	
ł	initial Registered Office: -	750 Lake Cook Ros Number Buffalo Grove City	Street 60089 Zip Code		350 Suite # Lake County	
3. {	Purpose or purposes for which the corporation is organized: (If not sufficient space to cover this point, add one or mo e sheets of this size.) The transaction of any or all lawful purposes for which corporations may be incorporated under the Illinois Sysiness Corporation Act of 1983.					
	_		Ch			
i , !	Paragraph 1: Authorized Shares, Issued Shares and Consideration Received:					
1	Par Value Class per Share	Number of Sha Authorized			Consideration to be Received Therefor	
	Common § NPV	100,000	1,	,200	\$ 1,200.00	
	of each class are: None	es, qualifications, limitations, over this point, add one or m		<i>I</i>	= \$ 1,200.00 respect of the shares	
					1	

(over)

5. OPTIONAL:	(a) Number of directors constituting (b) Names and addresses of the personal shareholders or until their successivame Name	ersons who are to serve as di	rectors until the first a	annual meeting of City, State, ZIP
6. OPTIONAL:	 (a) It is estimated that the value of a corporation for the following year (b) It is estimated that the value of the State of Illinois during the following the following the stimated that the gross and transacted by the corporation during it is estimated that the gross and transacted from places of business the following year will be: 	r wherever located will be: ne property to be located within lowing year will be: mount of business that will be ring the following year will be: mount of business that will be	\$	
7. OPTIONAL:	OTHER PROVISIONS Attach a separate sheet of this size incorporation, e.g., authorizing preer affairs, voting regionity requirements,	mptive rights, denying cumula fixing a duration other than pe	tive voting, regulating perpetual, etc.	Articles of g internal
The undersign Articles of Incomp Dated	ned incorporator(s) hereby deciare(s), a poration are true. July 20, 19 Signature and Name	98 1 1492 Worder	t the statements mad Address	e in the foregoing
2. Yype or 9gnatur April Y	e S. Myszka (Print Name) L. Nelson	Sity/Town 2.9770 South Street Oak Creet; City/Town	Wisconsin State	nois 60007 Zīp Code 53154 Zip Code
Signatur Michell (Type or (Signatures must used on conform NOTE: If a corpor	Le R. White Print Name) I be in BLACK INK on original documen	the corporation and the state of	I'll nois Struc rubber starup signati	a choup and the

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 Springfield, IL 62756

Department of Business Services Telephone (217) 782-9522 or 782-9523

C-162.18

99794456

File # D 6006-095-9

Form BCA-5.10 NFP-105.10

(Rev. Jan. 1999)

Jesse White 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



JUL 23 1999

JE-SE WHITE PRETARY OF STATE SUBMIT IN DUPLICATE

This space for use by Secretary of State

Date

7-23-99

Filing Fee

- \$ 5

Approved:

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

Type or print in black ink only. See reverse side for signature(s

1.	CORPORATE NAME:	Partners Pu	mping Ser	rvice, Inc.		
2.	STATE OR COUNTRY O	F INCORPORAT	TION: ——		lirois	
3.	Name and address of the of the Secretary of State (ered office as th	ey appear on the records of the o	ffice
	Registered Agent	Michael		D.	Batler	
	riogiotorea rigotit	First Name		Middle Name	List Vame	
	Registered Office	750 Lake 0	ook Road		Suite 350	
	riegistered Office	Number :	P.O. Box alone is not acceptable)			
		Buffalo Gr		60089	Lake	
	•	City		ZIP Code	County	
4.	Name and address of the	registered agent	and registe	ered office shall l	ne (after all changes herein report	ed):
	Registered AgentMichael			D.	Batler	
	, .og.o.o.ogo	First Name		Middle Name	Last Name,	
	Registered Office	7250 N. Ci	cero Aven	iue	Suite 200 🗙	
	r logistored Omeo .	Number	Street	Suite No. (A F	P.O. Box alone is not acceptable)	ᠮ᠘
		Lincolnwoo	d	60646	Cook X	,
	•	City		ZIP Code	County	
					•	

99794456

5.	will be identical.	usiness office of the registered agent, as chang	ed
6.	Service Edition Edition Doy, (IN DITO DOX OF INT		
	a. By resolution duly adopted by the board of director	s. <i>(Note 5)</i>	-
	b. By action of the registered agent	41-1-4	-
	by doing the registered agent.	(hote o)	
N	TF: When the registered agent changes the simple of		-
7.	OTE: When the registered agent changes, the signatures of (If authorized by the board of directors, sign here. See No.	both president and secretary are required.	
••	The understand composition has caused this statement to	(8 5)	
wh	The undersigned corporation has caused this statement to iom affirms, under penalties of perjury, that the facts stated h	be signed by its duly authorized officers, each erein are true.	اه : نــــن
Da	ted	- <u> </u>	·
	(Month & Dey), (Year)	(Exact Name of Corporation)	1011
att	ested byby	, ,	
	(Signature of Secretary or Assistant Secretary)	(Signature of President or Vice President)	=
	O _x	(orginature of Freshdern of Vice Freshdern)	am
	(Type or Print Name at d Title)	1 to	45
	(1996 of 1 thre Maine at a 1116)	(Type or Print Name and Title)	
	change of registered office by registered agent, sign here. See The undersigned, under penalties of perjudy, affirms that the	e facts stated herein are true.	
	(Month & Day) (Year)	(Signature of Registered Agent of Record)	Ē
	NOTES		
1.	The registered office may, but need not be the same as the registered office and the office address of the registered ag	principal office of the corporation. However, the ent must be the same.	10
2.	The registered office must include a street or road address; a		 е.
3.	A corporation cannot act as its own registered agent.	$O_{\kappa_{\alpha}}$	
4.	If the registered office is changed from one county to another of deeds of the new county a certified copy of the articles of in of change of registered office. Such certified copies may be	COPPORATION and a codifical back after attraction.	_ 1
5.	Any change of registered agent must be by resolution adopte then be signed by the president (or vice-president) and by the	d by the board of directors. This statement mu	-
6.	The registered agent may report a change of the registered registered agent. When the agent reports such a change, the agent.	Office of the compression for which he ar she	s d
			•

C-135,13

Please Return To:

958-66 Stroberty of County Clark's Office

Office

Office

Treating of State

The state of State

The stat I hereby certify that this is a true and correct copy, consisting of pages, as taken from the original on file in correct copy, consisting of ___ this office. Desse White

JESSE WHITE SECRETARY OF STATE

