UNOFFICIÁL COP3778161

1999-10-19 09:28:18

File Number 6071-248-4

Cook County Recorder



State of Allinois

Office of

The Secretary of State

Whereas.

ARTICLES OF INCORPORATION OF

INFORMATION TECHNOLOGY GROUP, 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.

Now Therefore, I, Jesse White, 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

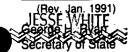
> day of A.D. and of OCTOBER 1999 the Independence of the United States the two hundred and

> > Desse White

Secretary of State

C-212.3

BCA-2. HONARIELES OF MEDIAP GRAPON Y



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."

FILED

OCT 6 1999

JESSE WHITE SECRETARY OF STATE

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date 10-6-99

Franchise Tax Filing Fee \$ 35,00

Approved:

/

		Information	Moghnalass	C	T
1	CORPORATE NAME:	Information	Technology	Group.	Inc.

-(The corporate name must or n'a n the word "corporation", "company," "incorporated," "limited" or an abbreviation thereof.) -- - -

2. Initial Registered Agent:

itial(Pegistered Office)

Jeffrey	E	Rochman	
Firet Name	Middle Initial	Last name	
55 West	Monroe	3950	
Number	Street	Suite #	
Chicage	60603	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.)
 - To engage in any lawful purposes for which corporations may be organized under the Business Corporations Act of Illinois

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

Class	Par Value per Share	Number of Shares Authorized	Number of Shares Consideration to be Received Therefor
common	\$ NPV	1000	100 \$ 1000.00

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.)

5. OPTIONAL:	(a) Number of directors cens ituting the initial troard 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					
			<u></u>			
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:	s				
	(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	\$		h -		
	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 FROVISIONS Attach a parate sheet of this size for any other provision to b Incorporation, e.g., authorizing preemptive rights, denying cumulat affairs, voting majority requirements, fixing a duration other than per	ive voting, reg	the Articles ulating inter	of nal		
8.	NAME(S) & ADDRESS(ES) OF INCORPORATOR(S	S)				
Dated Sep	tember 24 Signature and Name 1	Address		e foregoing		
Signatur	Street Efrey E. Rochman Chicago.	Illinois	60603			
	Print Name) City/Town	State		Zip Code		
2Signature	2. Street					
(Type or I	Print Name) City/Town	State		Zip Code		
3 Signature	3	7,				
	Charles and the contract of th	220		Zip Code		
(Signatures must be NOTE: If a corpor	City/Town in ink on original document. Carbon copy, photocopy or rubber stamp signatures ma ation acts as incorporator, the name of the corporation and the state of incorp sident or vice president and verified by him, and attested by its secretary or a	ooration shall b	of own and the	pies.)		
	FEE SCHEDULE					
		,		t		
	anchise tax is assessed at the rate of 15/100 of 1 percent (\$1.50 per \$1,000) o minimum of \$25.	on the paid-in car	oital represen	iea in this		

- 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