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1999-03-04 16:40:33
Cook County Recorder 23.00

File Number 4971-206-5



34-2

State of Illinois
Office of
The Secretary of State

Whereas, THE REINSTATEMENT OF
LAKE MORTGAGE COMPANY, 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, 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 5TH day of FEBRUARY A.D. 1999 and of the Independence of the United States the two hundred and 23RD



Jesse White

Secretary of State

BOX 170

13.60

(Rev. Jan. 1999)

Jesse White
Secretary of State
Department of Business Services
Springfield, IL 62756
http://www.sos.state.il.us

This space for use by Secretary of State

FILED

FEB 05 1999

JESSE WHITE
SECRETARY OF STATE

File # F-4971-206-5

SUBMIT IN DUPLICATE!

This space for use by
Secretary of State

Date 2-5-99
Filing Fee \$ 100.00

Approved: *[Signature]*

1. (a) Corporate name as of the date of issuance of the certificate of dissolution or revocation: LAKE MORTGAGE COMPANY, INC. **EXPEDITED**
- FEB 05 1999
- (b) Corporate name as changed: _____ **SECRETARY OF STATE** (Note 1)
- (c) If a foreign corporation having a certificate of authority under an assumed corporate name restriction, the assumed corporate name: _____ (Note 2)

2. State of incorporation: INDIANA

3. Date that the certificate of dissolution or revocation was issued: 2-1-97

4. Name and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: (Note 3) NOTICE! Completion of item #4 does not constitute a registered agent or office change. See note #3 on back of this form.

Registered Agent	<u>CT CORPORATION SYSTEM</u>		
	First Name	Middle Name	Last Name
Registered Office	<u>208 SOUTH LASSALLE STREET</u>		
	Number	Street	Suite # (A P.O. Box alone is not acceptable)
	<u>CHICAGO, ILLINOIS</u>	<u>60604-1135</u>	<u>COOK</u>
	City	ZIP Code	County

5. This application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, license fee and penalties required.

6. 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. (All signatures must be in **BLACK INK.**)

Date: JANUARY 20, 1999
(Month & Day) (Year)

attested by: Susan M. Bristow by [Signature]
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)

SUSAN M. BRISTOW - SECRETARY PETER S. BRIGGS - PRESIDENT
(Type or Print Name and Title) (Type or Print Name and Title)



BOX 170