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Cook County Recorder

25 50

File Number 6036-154-1



COOK COUNTY
RECORDER
EUGENE "GENE" MOORE
ROLLING MEADOWS

## State of Allinois Office of The Secretary of State

Whereas,

ARTICLES OF INCORPORATION OF DELTSLAYER, 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 23RD

JANA C

day of FEBRUARY A.D. 1999 and of the Independence of the United States the two hundred and  $_{23RD}$  .

Desse White

**Secretary of State** 



BCA-2.10 | ARTICLES OF INCORPORATION This space for use by Secretary of State

Secretary of State 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

FEB 23 1999

JESSE WHITE SECRETARY OF STATE

## SUBMIT IN DUPLICATE!

...This space for use by Secretary of State

Date - 2-33-99 .

Franchise Tax \$ 25,00

Cook

County

Filing Fee

\$ 75,00

Approved:

1.	CORPORATE NAME:DEERSLAYER, INC.		<u></u>
	(The corporate name must contain the word "corporation", "comp	any," "incorporated,"	"limited" or an abbreviation thereof.)
		från 10 paparaus de	The state of the s
2.	Initial Registered Agent: - ALFRED First Name	I Middle Initial	LEVINSON Last name
	Initial Registered Office: 2166 South River Road		26
	Nariber Nariber	Street	Suite #

60018

Zip Code

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.)

Des Ilaines

To transact any and all lawful business for which corporations may be incorporated under the Illinois Business Corporation Act, as amended.

Paragraph 1: Authorized Shares, Issued Shares and Consideration Received

Class	Par Value per Share	Number of SharesAuthorized	Number of Shares Proposed to be issued	Consideration to be Received Therefor
Common	\$ No par value	1,000	100	\$ 100.00

**TOTAL = \$** 100.00

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:	(b) Names and Addresses of the persons who are to serve as shareholders or until their successors are elected and qualify Name  Residential Addresses.	У		nual meeting of
6. OPTIONAL:	(a) It is estimated that the value of all property to be owned by to corporation for the following year wherever located will be:	the \$		
	(b) It is estimated that the value of the property to be located with	hin ¢		·
	the State of Illinois during the following year will be: (c) It is estimated that the gross amount of business that will	be ——		
	transacted by the corporation during the following year will to	oe:		
	(d) It is estimated that the gross amount of business that will transacted from places of business in the State of Illinois dur	ing		
	the following year will be:	\$		
	Attach & separate sheet of this size for any other provision incorporation, e.g., authorizing preemptive rights, denying cum affairs, voting mejority requirements, fixing a duration other than NAME(S) & ADDRESS(ES) OF INCORPORATO	n perpetual, e	g, regulatilig	internal
Dated	re Street	Addı	Road - Sui	•
ALFRED	L. IEVINSON, Attorney at Iaw Des Plan or Print Name) City/Town	nes, Illin S	itate	Zip Code
2	2. Stragt			
Signatu				7/2 O a d
(Туре с	or Print Name) City/Town	<b>7</b> , s	itate 	Zip Code
3. ———— Signatt	Otrock	3		<u> </u>
(Type (	or Print Name)City/Town		בינה	Zip Cod
(Signatures mu	st be in BLACK INK on original document. Carbon copy, photoco	tate of income	oration shall	be shown and the
CACOGIOTION	FEE SCHEDULE	<del></del>		
represent  The filing	I franchise tax is assessed at the rate of 15/100 of 1 percent (\$ ted in this state, with a minimum of \$25. fee is \$75.  mum total due (franchise tax + filing fee) is \$100.  when the Consideration to be Received as set forth in Item 4 does the Consideration of the Received as set forth in Item 4 does the Consideration of the Received as set forth in Item 4 does the Consideration of the Received as set forth in Item 4 does the Consideration of the Received as set forth in Item 4 does	s not exceed	\$16,667)	

 The Department of Business Services in Springfield will provide assistance in Confidence of Springfield, IL 62756
 Springfield, IL 62756 Illinois Secretary of State Springfield, IL 62756
Department of Business Services Telephone (217) 782-9522 or 782-9523

C-162.18