

FORM **BCA 2.10** (rev. July 2021)
ARTICLES OF INCORPORATION
Business Corporation Act

Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756
217-782-9522
217-782-6961
www.cyberdriveillinois.com

Remit payment in the form of a cashier's check, certified check, money order or an Illinois attorney's or CPA's check payable to Secretary of State.

See Note 1 on back to determine fees.

Filing Fee: \$150 Franchise Tax \$ _____ Total \$ _____ File # _____ Approved: _____

_____ **Submit in duplicate** _____ **Type or print clearly in black ink** _____ **Do not write above this line** _____

1. Corporate Name: _____

_____ The Corporate Name must contain the word "Corporation," "Company," "Incorporated," "Limited" or an abbreviation thereof.

2. Initial Registered Agent: _____
First Name Middle Initial Last Name

Initial Registered Office: _____
Number Street Suite No. (P.O. Box alone is unacceptable)

IL

_____ City ZIP County

3. Purposes(s) for which the Corporation is Organized:
If more space is needed, attach additional sheets of this size.

The transaction of any or all lawful businesses for which corporations may be incorporated under the Illinois Business Corporation Act.

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

Class	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Thereof
_____	_____	_____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL = \$

Paragraph 2 — The preferences, qualifications, limitations, restrictions and special or relative rights in respect of the shares of each class are:
If more space is needed, attach additional sheets of this size.

(cont. on back)

