

5. OPTIONAL:

- a. Number of directors constituting the initial board of directors of the Corporation: _____
- b. Names and addresses of persons who will serve as directors until the first annual meeting of shareholders or until their successors are elected and qualify.

Name	Address	City, State, ZIP
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. OPTIONAL:

- a. Estimated value of all property to be owned by the Corporation for the following year wherever located: \$ _____
- b. Estimated value of the property to be located within the State of Illinois during the following year: \$ _____
- c. Estimated gross amount of business that will be transacted by the corporation during the following year: \$ _____
- d. Estimated gross amount of business that will be transacted from places of business in the State of Illinois during the following year: \$ _____

7. OPTIONAL: OTHER PROVISIONS

Attach a separate sheet of this size for any other provision to be included in the Articles of Incorporation (e.g., authorizing preemptive rights, denying cumulative voting, regulating internal affairs, voting majority requirements, fixing a duration other than perpetual, etc.).

8. NAME(S) and ADDRESS(ES) OF INCORPORATOR(S)

The undersigned incorporator(s) hereby declare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true and correct.

Dated _____, _____
Month & Day Year

Signature and Name	Address
1. _____ <div style="text-align: center; margin-left: 100px;">Signature</div> _____ <div style="text-align: center; margin-left: 100px;">Name (type or print)</div>	1. _____ <div style="text-align: center; margin-left: 100px;">Street</div> _____ <div style="display: flex; justify-content: space-between; width: 100%; margin-left: 100px;"> City/Town State ZIP </div>
2. _____ <div style="text-align: center; margin-left: 100px;">Signature</div> _____ <div style="text-align: center; margin-left: 100px;">Name (type or print)</div>	2. _____ <div style="text-align: center; margin-left: 100px;">Street</div> _____ <div style="display: flex; justify-content: space-between; width: 100%; margin-left: 100px;"> City/Town State ZIP </div>
3. _____ <div style="text-align: center; margin-left: 100px;">Signature</div> _____ <div style="text-align: center; margin-left: 100px;">Name (type or print)</div>	3. _____ <div style="text-align: center; margin-left: 100px;">Street</div> _____ <div style="display: flex; justify-content: space-between; width: 100%; margin-left: 100px;"> City/Town State ZIP </div>

Signatures must be in **BLACK INK** on original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies. **NOTE: The incorporator must be either one or more persons licensed pursuant to the relevant profession or an Illinois attorney.**

Note 1: 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. (Minimum initial franchise tax is \$25.)

Please see filing periods set forth below regarding the franchise tax exemption amount for each year. (Tax amount minus exemption amount. If a negative number, no franchise tax due.)

Franchise Tax Liability Exemption Amounts

FILING PERIOD EXEMPTION AMOUNT

1/1/20-12/31/20	Exemption \$30.00
1/1/21-12/31/21	Exemption \$1,000.00
1/1/22-12/31/22	Exemption \$10,000.00
1/1/23-12/31/23	Exemption \$100,000.00
1/1/24 and after	No Franchise Tax Due.

- **The minimum total due** (franchise tax + filing fee) is \$150.

Note 2: Return to:

Firm name

Attention

Mailing Address

City, State, ZIP