

TRANSMITTAL LETTER

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Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-05/15/01--01081--015
*****87.50 *****87.50

SUBJECT: CENTRAL LEASING MANAGEMENT, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: DONNA BENEVICE
Name (Printed or typed)

1420 KENSINGTON ROAD SUITE 209
Address

OAK BROOK IL 60523
City, State & Zip

(630) 928-4700
Daytime Telephone number

FILED
01 MAY 15 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

gfe/s/22

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CENTRAL LEASING MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1420 KENSINGTON ROAD SUITE 209
OAK BROOK IL 60523

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EMPLOYEE LEASING

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JAMES FRIEL
15770 WINWARD WAY CIRCLE
FORT MEYERS, FL. 33908

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JEFFREY SCOTT WILLIAMS
1000 BARBERRY LANE
MT. PROSPECT IL 60056

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

James Friel
Signature/Registered Agent

5-14-01
Date

Jeffrey Williams
Signature/Incorporator

5-14-01
Date

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TALLAHASSEE, FLORIDA