

TODD ROKITA
SECRETARY OF STATE
CORPORATIONS DIVISION
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Telephone: (317) 232-6576

Indiana Code 23-1-21-2 FILING FEE: \$90.00

INSTRUCTIONS: Use 8 1/2" x 11" white paper for attachments.

Present original and one copy to address in upper right corner of this form.

Please TYPE or PRINT.

Please visit our office on the web at www.sos.in.gov.

ARTICLES OF INCORPORATION				
The undersigned, desiring to form a corpora	ation (hereinafter referred to as "Corpor	ation") pursuant to the provisions	s of:	
☐ Indiana Business Corporation Law ☐ Indiana Professional Corporation Act 1983, Indiana Code				
As amended, executes the following Articles of Incorporation:  23-1.5-1-1, et seq. (Professional corporations must include Certificate of Registration.)				nust include
	ARTICLE I - NAME AND PR			
Name of Corporation (the name must include the word "Corporation", "Incorporated", "Limited", "Company" or an abbreviation thereof)				
Principal Office:				
Post office address		City	State	ZIP code
	ARTICLE II - REGISTERED O	FFICE AND AGENT	1	
Registered Agent: The name and street address of the Corporation's Registered Agent and Registered Office for service of process are:				
Name of Registered Agent	, ,	<u> </u>	·	
Address of Registered Office (street or building	9)	City	Indiana	ZIP code
	ARTICLE III - AUTHORI	ZED SHARES		
Number of shares the Corporation is authorized to issue:				
If there is more than one class of shares, shares with rights and preferences, list such information as "Exhibit A."				
ARTICLE IV - INCORPORATORS  [the name(s) and address(es) of the incorporators of the corporation]				
<b>1</b>				
NAME	NUMBER AND STREET OR BUILDING	CITY	STATE	ZIP CODE
In Witness Whereof, the undersigne	nd hoing all the incornerators of ac-	d Corporation avasuta these	Articles of Incom	oration and
verify, subject to penalties of perjury	that the statements contained he	rein are true.	Articles of incorp	oration and
	•	,		
this day of	, 20	·		
Signature of incorporator		Printed name		
Signature of incorporator		Printed name		
Signature of incorporator	Printed name			
This instrument was prepared by: (name)				
Address (number, street, city and state)				ZIP code