



# ARTICLES OF INCORPORATION

State Form 4159 (R16 / 5-14)

Approved by State Board of Accounts, 2014

**CONNIE LAWSON**  
**SECRETARY OF STATE**  
**BUSINESS SERVICES DIVISION**  
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- INSTRUCTIONS:**
1. Use 8 1/2" x 11" white paper for attachments.
  2. Present original and one copy to address in upper right corner of this form.
  3. Please TYPE or PRINT in INK.
  4. Please visit our office at [www.sos.in.gov](http://www.sos.in.gov).
  5. Make check or money order payable to Secretary of State.

Indiana Code 23-1-21-2

**FILING FEE: \$90.00**

## ARTICLES OF INCORPORATION

The undersigned, desiring to form a Corporation (*hereinafter referred to as "Corporation"*) pursuant to the provisions of:

- Indiana Business Corporation Law                       Indiana Professional Corporation Act 1983, Indiana Code 23-1.5-1-1, et seq. (*Must include a Certificate of Registration.*)

As amended, executes the following Articles of Incorporation:

### ARTICLE I - NAME AND PRINCIPAL OFFICE

Name of Corporation (*The name must include the word Corporation, Incorporated, Limited, Company or an abbreviation thereof.*)

Address of Principal Office (number and street)	City	State	ZIP code
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### ARTICLE II - REGISTERED OFFICE AND AGENT

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 (*Cannot be the corporation itself.*)

Address of Registered Office ( <i>number and street</i> ) ( <b>PO Box not accepted</b> )	City	State	ZIP code
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**IN**

**Required:**

- By checking the box, the Signator(s) represents that the registered agent named in the application has consented to the appointment of registered agent.

### ARTICLE III - AUTHORIZED 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 (INCORPORATORS MAY NEVER BE AMENDED)

NAME	NUMBER AND STREET OR BUILDING	CITY	STATE	ZIP CODE

In Witness Whereof, the undersigned being all the incorporators of said Corporation sign these Articles of Incorporation and verify, subject to penalties of perjury, that the statements contained herein are true,

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 and street, city, state, and ZIP code*)