of
Riverwest Investment Cooperative

Document Title Member Owned

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Name and Return Address

Thomas Stucco
Riverwest Investment Cooperative
Member Owned.

2462 N. Bremen St.

Milwaukee WI 53212

Parcel Identification Number (PIN)

DFI/CORP/30 DOCUMENT 2/00 United States of America
State of Wisconsin
DEPARTMENT OF FINANCIAL INSTITUTIONS



Greetings:

I do hereby certify that the annexed copy has been compared with the document on file in the Corporation Section of the Division of Corporate & Consumer Services of this department, and that the same is a true copy thereof; and that I am the legal custodian of said document, and that this certification is in due form.



DATE: June 30, 2003

BY: Pofeed Kares

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department

RAY ALLEN, Deputy Administrator Division of Corporate & Consumer Services Department of Financial Institutions

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This information must be completed by submitter: <u>document title</u>, <u>name & return address</u>, and <u>PIN</u> (if regulared). Other information such as the granting clauses, legal description, etc. may be placed on this first page of the document or may be placed on additional pages of the document. <u>Note:</u> Use of this cover page adds one page to your document and <u>\$2.00 to the recording fee.</u> Wisconsin Statutes, 59.517. WRDA 2/96

Sec. 185.05 NSTITUTIONS Wis State OF WISCONSIN

State of Wisconsin Department of Financial Institutions



2003 JUN 17 AM 10: 06

ARTICLES OF INCORPORATION - COOPERATIVE

Executed by the undersigned for the purpose of forming a Wisconsin cooperative under Ch. 185 of the Wisconsin Statutes:

Article 1. Name of the cooperative:	
Riverwest Investment Cooperative Me	ember Owned
(must include the term "cooperat	tive" or an abbreviation thereof)
Article 2. Its term of existence shall be perpetua	of OR(term in years).
Article 3. The cooperative is organized to engage in a cooperative association may be organized under C	
Article 4. (The cooperative must maintain either a p Select, mark (X) and comp	
A The address of the cooperative's principal office in Wisconsin is: (Provide complete address, including street and number, city, county, state and ZIP code) OR	B. The name and address of the cooperative's registered agent in Wisconsin is: (Provide complete address, including street and number, city, county, state and ZIP code) 2462 N. Bremen Street Milwaukee, WI 53212
Article 5. The number of directors constituting the one on the shall be (number). Article 6. The classes of members are all of a si classes:	

FILING FEE - \$25.00, or more See instructions, suggestions, and procedures on following pages.

DFI/CORP/202(R02/10/03) Use of this form is voluntary. FILE ID# - 1 of 6

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Article 7. The cooperative is organized without capital stock OR with capital stock.				
Article 8. (OPTIONAL) (See instructions)				
The cooperative is authorized to issue (number) shares of capital stock of the following description:				
n				

Article 9. Upon liquidation, the cooperative's assets shall be distributed on the following basis:

The cooperative's assets shall be distributed as follows upon liquidation. First any and all debts will be satisfied accordingly. Any remaining assets shall be liquidated and distributed in proportion to ones paid in capital contribution. Membership fees are considered a paid in capital contribution.

Article 10. (Select, mark (X) and complete the appropriate item)

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INCORPORATOR's name and business address:
 I) Quinn Wilder; 161 W. Wisconsin Ave., Ste 6000; Milwaukee, WI 53202
 II) Christopher Johns; 2562 N. Bremen Street; Milwaukee, WI 53212

- III)
 James Klisch; 2109 N. Buffum
 Street; Milwaukee, WI 53212
- IV) John Rossetto; 1003 E. Potter
 Ave; Milwaukee, WI 53207
- V) Rudy Rossetto; 844 Criglas Rd; Wales, WI 53183
- VI) Thomas M. Stocco; 2462 N. Bremen Street; Milwaukee, WI 53212

VII)

Signature: I)

II)

III)

IV)

V)

VI)

VII)

Thomas M. Stocco

This document was drafted by

(Name the individual who drafted the document)

State of Wisconsin	
County of Milwaukse	
Personally came before me on_	(date), the aforementioned incorporators
I) <u>Duinn Wilder</u>	II) Chris Johns
III) James Kllsch	IV) John Rossetto
V) Rudy Rossetto	VI) Thomas Stocco
VII)	
to me known to be the persons who ex	secuted the foregoing instrument, and acknowledged the same.
+	Chantelle W. Stocco (Signature of Notary)
+ + + + + + + + + + + + + + + + + + +	(Printed name of Notary)
(Seal impression) My commission, issued by the State of	f Wisconsin expires on 3.21.04.

<u>INSTRUCTIONS</u> (Ref. sec. 185.05, Wis. Stats. for document content)

Submit two signed, notarized copies to Dept. of Financial Institutions, P O Box 7846, Madison WI, 53707-7846, together two separate checks, one for the **FILING FEE** and other for the county **RECORDING FEE** (see instructions below). Filing fee is **non-refundable**. (If sent by Express or Priority U.S. mail, address to 345 W. Washington Ave., 3rd Floor, Madison WI, 53703). Both copies must bear original manual signatures. This form may be used to accomplish a filing required or permitted by statute to be made with the department. **NOTICE:** This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 608-266-8818 for TDY.

Article 1. The name must include the term "cooperative" or an abbreviation thereof.

Article 2. Indicate (X) if the cooperative is to have perpetual existence or a specific term. If for a specific term, indicate the number of years or the date its existence will terminate.

Article 3. A purpose clause is required by sec. 185.05(1)(c). If the pre-printed statement is not desired, strike it and enter a substitute statement.

Riverwest Investment Cooperative Member Owned
2462 N. Bremen Street
Milwaukee, WI 53212

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Your return address and phone number during the day: ('414) 372-3222