



Fire Dept.	<input checked="" type="checkbox"/>	/ / /	Electrical Dept.	<input type="checkbox"/>	/ / /
Building Dept.	<input checked="" type="checkbox"/>	11/7/18	Plumbing Dept.	<input type="checkbox"/>	/ / /
Health Dept.	<input type="checkbox"/>	/ / /	Village Clerk	<input type="checkbox"/>	/ / /

D4
11/26/18

VILLAGE OF BROADVIEW
APPLICATION FOR BUSINESS LICENSE
(Village Code Title 3 – Chapter 1 – Section 2)

New business Change of Ownership Change of Name

Date: 11-07-2018

(P.O. BOX ADDRESSES NOT VALID)

Section 1

Business Name A & K Event Planning and Professional Services, LLC
D/B/A Name Change in Progress - A & K Virtual Administrative Professionals, LLC
Address 2428 S. 11th Avenue
City Broadview State Illinois Zip 60155
Telephone 847-447-2325 Fax # _____
Email kdavis@akvirtualseervices.com

FEIN NUMBER 83-2287578 STATE SALES TAX # _____

Sole Proprietorship Partnership Not For Profit Corporation

State of Incorporation Illinois Date 10-15-2018
Name of Corporation A & K Virtual Administrative Professionals, LLC
Address 2428 S. 11th Avenue
City Broadview State Illinois Zip 60155
Telephone 847-447-2345/ Cell : 630-297-6155 X Fax # _____
Federal License # _____ (Copy of License will be required with application)
State License # _____ (Copy of License will be required with application)

Section 2 – Owners/Partners/Officers

This section must be completed

Name	Title	SSN #	Address	City	State
Kathleen Davis	Owner	345-62-8690	2428 S. 11th Avenue	Broadview	IL

I, the Applicant, do hereby personally in my capacity as _____ of _____ Corporation do hereby certify and represent that I/the Corporation have not heretofore had a business license revoked by any municipality or government agency, and further state that I/the Corporation will otherwise comply with all Village Codes and other applicable Statutes and laws in the operation and conduct of the business.

Section 3

Nature of Business Virtual Administrative Assistant and Event Planning
Brief Description Work from home secretarial support -



Business Type					
Manufacturing	<input type="checkbox"/>	Retail Sales	<input type="checkbox"/>	Day Care	<input type="checkbox"/>
Professional	<input checked="" type="checkbox"/>	Vending	<input type="checkbox"/>	Food/Beverage	<input type="checkbox"/>
Towing	<input type="checkbox"/>	Service	<input type="checkbox"/>		
Livery	<input type="checkbox"/>	Transportation	<input type="checkbox"/>		
Fuel Service Station	<input type="checkbox"/>	Warehousing	<input type="checkbox"/>		

Applicant Name Kathleen Davis
 Address 2428 S. 11th Avenue
 City Broadview State Illinois Zip Code 60155
 DOB 01-29-1967 Social Security # 345-62-8690
 Telephone 847-447-2345/ Fax Cell: 630-297-6155 Email kdavis@akvirtualservices.com
 Property Owner Name Andrew Davis, Sr.

Section 4 - Business Profile

President Kathleen Davis
 Vice President _____
 Treasurer _____
 Business Contacts
 Name _____ Phone _____
 Name _____ Phone _____
 Name _____ Phone _____
 Hours of Operation 7:00 am to 5:00 pm
 Number of Employees 1
 Seating Capacity 1 (If applicable)
 Company Vehicles No Yes
 State of Registration _____
 Vending Equipment: Pop/Water Coffee Food/Snacks Cigarettes Candy Amusement
 STICKER NO. Food Truck Ice Cream Washing Dryers Detergent/
 Truck Machines Bleach Gumball/
 Novelty
 Hazardous Materials on Premise Yes No
 If yes to above, list Generic Name & Quantity

Name	Quantity
_____	_____
_____	_____
_____	_____

Section 5

Property Owned Leased Lease Term _____
 Building Size _____ Square Feet _____ Parking Stalls _____
 If leased, provide the following:
 Property Owner's Name _____
 Address _____ State _____ Zip _____
 City _____

BUSINESS LICENSES SHALL BE DISPLAYED IN A VISIBLE LOCATION

Violation of any law of the State of Illinois, the United States of American, or any ordinance of the Village of Broadview in force and effect during all or part of the period covered by any license issued pursuant to this application in the conduct of said business, will result in a revocation of the license issued hereunder

Signature Kathleen Davis Date 11-7-18



RAYMOND K. PELLETIER
Chief of Police

BROADVIEW POLICE DEPARTMENT

2350 SOUTH 25th AVENUE • BROADVIEW, IL 60155-3800

Emergency Information

708/345-6550
Fax: 708/681-0248

Business Name: A & K Virtual Administrative Professionals Address: 2428 S. 11th Avenue

Business Phone: 847-447-2345 Fax: _____ Business Email kdavis@virtualseervices.com

Alarm Company: AT & T Phone: 630-297-6155

Business Hours: Mon 7-5 Tues: 7-5 Wed: 7-5 Thurs: 7-5

Fri: 7-5 Sat: 8-5 Sun: 8-5

Key holders to be contacted, please list as many as possible.

(Please list in the order you wish calls to be made for after hours emergencies. Be sure to include area codes.)

#1 Name Kathleen Davis Home Phone: 847-447-2345

Address 2428 S. 11th Avenue Cell phone/Pager 630-297-6155

City/State Broadview, IL

#2 Name Andrew L. Davis, Sr. Home Phone: _____

Address 2428 S. 11th Avenue Cell phone/Pager 630-291-3739

City/State Broadview, IL

#3 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

#4 Name _____ Home Phone: _____

Address _____ Cell phone/Pager _____

City/State _____

OFFICE USE ONLY

SIGN INSPECTION FEE: _____
BUSINESS LICENSE FEE: _____
COOK COUNTY HEALTH INSPECTION FEE: _____
ELEVATOR INSPECTION FEE: _____
ANNUAL BUILDING INSPECTION FEE: _____

LICENSE NO. _____



Form **LLC-5.5**

**Illinois
Limited Liability Company Act
Articles of Organization**

FILE # 07281943

Secretary of State Jesse White
Department of Business Services
Limited Liability Division
www.cyberdriveillinois.com

Filing Fee: \$150

Approved By: TLB

**FILED
OCT 15 2018
Jesse White
Secretary of State**

1. Limited Liability Company Name: A & K EVENT PLANNING & PROFESSIONAL SERVICES, LLC

2. Address of Principal Place of Business where records of the company will be kept:
2428 S. 11TH AVENUE

BROADVIEW, IL 60155

3. The Limited Liability Company has one or more members on the filing date.

4. Registered Agent's Name and Registered Office Address:

KATHLEEN DAVIS
2428 S 11TH AVE
BROADVIEW, IL 60155-4873

5. Purpose for which the Limited Liability Company is organized:
"The transaction of any or all lawful business for which Limited Liability Companies may be organized under this Act."

6. The LLC is to have perpetual existence.

7. Name and business addresses of all the managers and any member having the authority of manager:

DAVIS, KATHLEEN
2428 S. 11TH AVENUE
BROADVIEW, IL 60155

8. **Name and Address of Organizer**

I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Organization are to the best of my knowledge and belief, true, correct and complete.

Dated: OCTOBER 15, 2018

KATHLEEN DAVIS
2428 S. 11TH AVENUE
BROADVIEW, IL 60155

Date of this notice: 10-23-2018

Employer Identification Number:
83-2287578

Form: SS-4

Number of this notice: CP 575 G

A & K EVENT PLANNING AND
PROFESSIONAL SERVICES
KATHLEEN DAVIS SOLE MBR
2428 S 11TH AVE
BROADVIEW, IL 60155

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 83-2287578. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is A&KE. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

Keep this part for your records.

CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

9999999999

Your Telephone Number Best Time to Call
() -

DATE OF THIS NOTICE: 10-23-2018
EMPLOYER IDENTIFICATION NUMBER: 83-2287578
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023
|||

A & K EVENT PLANNING AND
PROFESSIONAL SERVICES
KATHLEEN DAVIS SOLE MBR
2428 S 11TH AVE
BROADVIEW, IL 60155

Inspection Fees:

Home Inspection: \$100.00
Condo/Co-Op: \$100.00
Apt. Insp: \$ 25.00

VILLAGE OF BROADVIEW

Building Department
2350 South 25th Avenue
Broadview, IL 60155-3800

(708) 345-8174 or (708) 681-3600

Date of Insp: _____

Owner's Name: Kelly Davis

Owner's Phone No: _____

Property Address: 2428 S. 11th Ave

Home Based Business

✓ Please correct the following property inspection violations checked below:

- Address of property shall be on house and garage.
- Remove junk/debris in yard, cut high grass and weeds.
- Front stoop and handrails must be in good condition and painted.
- Repair defective walkway/sidewalk free of trip hazard.
- All exterior/interior painted surfaces shall be free of peeling paint.
- Upgrade electrical service must be 100AMP with 20-circuits available.
- Have roof on house inspected by licensed roofing contractor and certified.
- Repair/replace fence.
- Have gutters and downspouts repaired/replaced.
- Tuck-pointing on building and chimney as needed.
- Repair walkways and driveways from trip hazard.
- All exterior outlets must be GFCI protected.
- Install vacuum breakers on all hose connection (interior / exterior).
- Exit door locks are required to open from the inside without the use of a key, change lock to thumb turn lock.

Garage:

- Have roof on garage inspected by licensed roofing contractor and certified.
- Install GFCI outlets to all receptacles.
- Install an outlet to power the garage door opener.
- Repair defective overhead door.
- Eliminate all loose and peeling paint on garage.

Basement:

- Illegal BX wiring or other illegal wiring must be eliminated and replaced with conduit.
- Need handrail to basement.
- Have furnace and hot water tank inspected by licensed HVAC inspector and certified.
- Water heater relief valve must be hard pipe and 6 inches from floor.
- A/C disconnect must be at least 24 inches.
- Furnace flue and hot water tank flue must be in good condition.

- Illegal basement living quarters must be eliminated.
- Install a vacuum breaker on utility sink faucet.
- Install a cover for all open floor drains.

Bathrooms:

- Bathrooms must have exhaust system with air exhausted to the exterior of the home.
- All plumbing fixtures sinks, tubs, faucets and drains must be properly installed and in proper working order.
- Repair/replace floor tiles.
- Remove mold and mildew in shower area.

Kitchen:

- All outlets within 6' of water source must be GFI protected.
- All plumbing fixtures (sinks, faucets and drains must be properly installed and in proper working order.
- All light switches and outlets must have covers.
- Eliminate all loose and peeling paint.
- All lights and fixtures must be operable and in good condition with covers.

Living/Dining Rooms:

- Replace all damaged ceiling tiles.
- Repair all doors to open and close freely closet(s).
- Replace any/all broken or cracked windows.
- All doors interior in good condition with hardware.
- All walls/ceiling shall be in a state of good repair, free of holes, cracks and peeling paint.
- Floors must be in a state of good repair, no tripping hazards tile/carpet.
- Entire house must have 3 prongs electrical box grounded outlets.

Bedrooms:

- Repair/replace defective ceiling light fixtures.
- Repair all doors to open and close freely including closet(s).
- Replace/repair all broken or cracked windows and screens.
- Replace pull chain in closet.

General:

- Install operable smoke detectors in each bedrooms of the home including basements.
- Install CO detectors within 15 feet of bedrooms.
- No Water On at Time of Inspection.**

Building Inspector: *[Signature]*
Signature:

Date: 11/14/18

Approved: _____

Not Approved: _____

Title 13 is needed for all property sold/transferred/quit claimed:

Zoning: Rooms ____ BathRm ____ Garage ____ Basmt ____
Stories ____ A/C ____ Construction ____ Elec ____