

DATE: 03/24/2003 DOCUMENT ID 200308001996

DESCRIPTION DOMESTIC ARTICLES/NON-PROFIT (ARN)

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EXPED

PENALTY

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Receipt

This is not a bill. Please do not remit payment.

KUNFA ZHANG XIANGLIN YAN 6373 HUNTERS GREEN DRIVE MASON, OH 45040

## STATE OF OHIO

## Ohio Secretary of State, J. Kenneth Blackwell

1377179

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

THE MASON MARATHON, INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC ARTICLES/NON-PROFIT

Document No(s):

200308001996



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 21st day of March, A.D.

Cuneth Hackinell

Ohio Secretary of State



## Prescribed by J. Kenneth Blackwell

Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

2003 MAR 2

PO Box 1390
Columbus, OH 43216

No Columbus, OH 43216
Columbus, OH 43216
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www.state.oh.us/sos e-mail: busserv@sos.state.oh.us

## INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Non-Profit) Filing Fee \$125.00

HE UNDERSIGNED HEREB	Y STATES THE FOLLOWING:		
CHECK ONLY ONE (1) BOX			
Articles of Incorporation     Profit		(3) Articles of Incorporation Professional (170-ARP)	
(113-ARF)	(114-ARN)	Profession	
ORC 1701	ORC 1702	ORC 1785	
omplete the general informati	on in this section for the box checked	d above.	
IRST: Name of Corpora	tion The Ma	rson Marathon, Inc	
NEGOND. Laurtion	Mason	Warren	
ECOND: Location	(City)	(County)	
ffective Date (Optional)	Date specified of	can be no more than 90 days after date of filing. If a date is specified, e a date on or after the date of filing.	
	(mm/dd/yyyy) the date must b	e a date on or aller the used or ming.	
☐ Check here if additional	provisions are attached		
		1	
complete the information in this s	ection if box (2) or (3) is checked. Complete	ing this section is optional if box (1) is checked.	
Description	h as maration is formed	ing this section is optional if box (1) is checked.	
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To host	a manufaction evens	t in late October every year ses outstanding running experiences	Ès
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TO host  in Mason	a manufan evenu , Ohio that provi ficipants who are	t in late October every year  Ses outstanding running experiences  dedicated to supporting charitum  children). To also organize various	res
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Purpose for which To host  in Mason	a manufan evenu , Ohio that provi ficipants who are	t in late October every year  Ses outstanding running experiences  dedicated to supporting charitum  children). To also organize various	res
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To host  in Mason  for para  (especial  Yunning e	a manufan evenu , Ohio that provi ficipants who are	t in late October every year ides outstanding running experiences and dedicated to supporting charity which children). To also organize various for charities that support	res
THIRD: Purpose for which To host in Mason for part (especial yunning a complete the information in the complete the complet	a manufact event.  Ohio that providing the providing the charities for who are wents to raise mothers section if box (1) or (3) is checked shares which the corporation is authorised.	t in late October every year  ides outstanding running experiences  a dedicated to supporting charitum  a children). To also organize various  may for charities that support	res
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To host  in Mason  for para  (especial  ) unning a	a manufact events, Ohio that providing the charities for who are who the charities for events to raise mothers which the corporation is authorized and the providing the charities for events to raise mothers which the corporation is authorized and the parvalue if any)  (No. of Share	t in late October every year  ides outstanding running experiences  e dedicated to supporting charities  or children). To also organize various  may for charities that support of  orized to have outstanding (Please state if shares are	us

Last Revised: May 2002

Completing the information in	this section is optional		
FIFTH: The following are the	e names and addresses of the individuals	who are to serve as initial (	Directors.
Kus	nfa Zhang		
(Name)	73 Hunters Gree	en Drive	_
(Street)	NOTE: P.O. Box Addresses are		_
Mason	OH	45040	•
(City)	(State)	(Zip Code)	_
(Name)	enghe Zhan		_
	1862 Birchwood Ct		_
(Street)	NOTE: P.O. Box Addresses are	•	<del></del>
Mason (Cib)	OH	45040 (Zip Code)	_
	•	(Zip Code)	
(Name)	Vi'Mage DV.		_
7880 (Street)	NOTE: P.O. Box Addresses are	NOT acceptable	<del></del>
Cincinnat		•	•
(City)	(State)	45-24 2 (Zip Code)	_
REQUIRED  Must be authenticated (signed) by an authorized representative (See Instructions)	Authorized Representative		3/16/20-03 Date
	Print Name		2/11/2
	Authorized Representative		3/16/2003 Date
	SHENGHE ZH	a N	
	Authorized Representative		7/16/2003 Date
	Print Name		

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Last Revised: May 2002

Complete the information in th	is section if box (1) (2) or (3) is checked.	
ORIGI	NAL APPOINTMENT OF STATUTORY A	GENT
The undersigned, being at lea	st a majority of the incorporators of The Masom	Marathon Inc
hereby appoint the following to	be statutory agent upon whom any process, notice or demand re-	quired or permitted by
1	corporation may be served. The complete address of the agent is	
	fa Zhang	
(Name) 637	3 Hunters Green Drive	
(Street)	NOTE: P.O. Box Addresses are NOT acceptable.	
Maso	777 ,Ohio 45040 (Zip Code)	
(City)	(Zip Code)	
Must be authenticated by an authorized representative		3/16/02
authorized representative	Authorized Representative	Date
	10000	3/16/03
	Authorized Representative	Date
	Lls	3/16/03
	Authorized Representative	Date
	ACCEPTANCE OF APPOINTMENT	
The Undersigned.	KUNFA ZHANG	
The Undersigned,	The Mason Maration	, named herein as the
Statutory agent for,	composite appointment of statutory agent for said entity.	, Inc
, nereby auxilowieuges and ac		
	Signature: (Statutory Agent)	

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Last Revised: May 2002