



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/20/2004	200425901944	DOMESTIC ARTICLES/NON-PROFIT (ARN)	125.00	.00	.00	.00	.00

Receipt

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

BLOOM FURNACE RECREATION
8055 HAMPORT RD
WHEELERSBURG, OH 45694

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1488712

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

BLOOM FURNACE RECREATIONS, INC.

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

Document(s)

DOMESTIC ARTICLES/NON-PROFIT

Document No(s):

200425901944



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 9th day of September,
A.D. 2004.

J. Kenneth Blackwell
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)

www.state.oh.us/sos
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***

☒ No PO Box 670
Columbus, OH 43216
INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Non-Profit)

Filing Fee \$125.00

RECEIVED
SEP 9 2004
J. KENNETH BLACKWELL
SECRETARY OF STATE

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) <input type="checkbox"/> Articles of Incorporation Profit (113-ARF) ORC 1701	(2) <input checked="" type="checkbox"/> Articles of Incorporation Non-Profit (114-ARN) ORC 1702	(3) <input type="checkbox"/> Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation Bloom Furnace Recreations, Inc.

SECOND: Location South Webster Scioto
(City) (County)

Effective Date (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

To provide interdenominational recreational and social activities for young adults.

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any)

(Refer to instructions if needed)

(No. of Shares) _____ (Type) _____ (Par Value) _____

Completing the information in this section is optional**FIFTH:** The following are the names and addresses of the individuals who are to serve as initial Directors.

Janet Fargo

(Name)

205 Bloom Furnace Rd.

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

South Webster

(City)

Ohio

(State)

45682

(Zip Code)

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

(State)

(Zip Code)

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.


(City)

(State)

(Zip Code)

REQUIREDMust be authenticated
(signed) by an authorized
representative

(See Instructions)



Authorized Representative

Janet Fargo

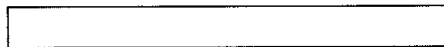
(print name)

205 Bloom Furnace Rd.

South Webster, OH 45682


8-20-04

Date

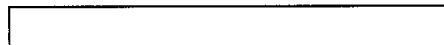


Authorized Representative

(print name)

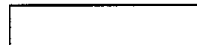


Date



Authorized Representative

(print name)



Date

Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Bloom Furnace Recreations, Inc.
hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by
statute to be served upon the corporation may be served. The complete address of the agent is

Janet Fargo

(Name)

205 Bloom Furnace Rd.

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

South Webster

Ohio

45682

(City)

(Zip Code)

Must be authenticated by an
authorized representative

Janet Fargo
Authorized Representative

8-20-04

Date

Authorized Representative

Date

Authorized Representative

Date

ACCEPTANCE OF APPOINTMENT

The Undersigned,

Janet Fargo

, named herein as the

Statutory agent for,

Bloom Furnace Recreations, Inc.

, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: Janet Fargo

(Statutory Agent)