

DATE: 05/25/2007

DOCUMENT ID DESCRIPTION DOMESTIC/REINSTATEMENT (REN)

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

APOSTOLIC TEMPLE OF CHRIST, INC. P. O. BOX 436 PORTSMOUTH, OH 45662

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

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

APOSTOLIC TEMPLE OF CHRIST, INC., OF PORTSMOUTH, OHIO

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

Document(s)

DOMESTIC/REINSTATEMENT

Document No(s):

200714402408



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 24th day of May, A.D. 2007.

Ohio Secretary of State



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

Expedite this Form: (Select One) Mail Form to one of the Following: PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 *** PO Box 788 O No Columbus, OH 43216

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REINSTATEMENT

(For Domestic or Foreign, Profit or Nonprofit) Filing Fee \$25.00

THE UNDERSIGNED DESIR	ING TO FIL	.E A:				
(CHECK ONLY ONE (1) BO	x)					
(1) Reinstatement & Appointment of Agent (for failure to maintain a statutory agent) (108-REN)		(2) Reinstatement & Appointment of Agent for a Foreign Corporation (for failure to maintain a statutory agent) (111-FREA)		(3) Reinstatement of a Nonprofit Corporation (for failure to file a statement of continued existence) (109-RENN)		
(4) Reinstatement of a Registered Partnership Having Limited Liability (for failure to file annual or biennial reports) (112-PLR)			(5) Reinstatement of a Professional Corporation (for failure to file annual or biennial reports)			
THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES			THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES			
Complete ALL of the general is	nformation i	in this section for the box	checked above.			
Name of Entity Apostolic Temple of Christ Inc., of Portsmouth, Ohio						
Charter or Registration No.		417219				
Cancellation Date The entity was canceled on (list date):				January 5, 1996 (Date)		
Complete the information in thi	s section if	box (1) or (2) is checked.				
Name and Address of New Agent (if applicable)		(Name)			· · · · · · · · · · · · · · · · · · ·	
		(Street)	NOTE: P.O. Box A	ddresses are NOT acceptable.		
				Ohio		
		(City)		(State)	(Zip Code)	
		ACCEPTANCE OF A	POINTMENT			
The Undersigned, the Statutory agent for, hereby acknowledges and acc	cepts the ap	ppointment of statutory a	gent for said enti	ty.	_, named herein as	
	Signature:		(Statutory Ag	ent)		
REQUIRED Must be authenticated (signed by an authorized representative (See Instructions)	é [Paul Mucho Authorized Representat	l Hy	fand	5/23/07 Date	

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Authorized Representative

Last Revised: May 2002