



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/25/2007	200726701972	DOMESTIC/REINSTATEMENT (REN)	25.00	.00	.00	.00	.00

Receipt

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

DEPARTMENT OF SOCIOLOGY AND ANTHROPOLOGY - SWS
UNIVERSITY OF RHODE ISLAND
KINGSTON, RI 02881-0808

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

936555

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

SOCIOLOGISTS FOR WOMEN IN SOCIETY

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

Document(s)

DOMESTIC/REINSTATEMENT

Document No(s):

200726701972



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 September,
A.D. 2007.

Ohio Secretary of State



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

Prescribed by :

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:

- ☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
- ☒ No PO Box 788
Columbus, OH 43216

REINSTATEMENT

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

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

(1) <input type="checkbox"/> Reinstatement & Appointment of Agent (for failure to maintain a statutory agent) (108-REN)	(2) <input type="checkbox"/> Reinstatement & Appointment of Agent for a Foreign Corporation (for failure to maintain a statutory agent) (111-FREA)	(3) <input checked="" type="checkbox"/> Reinstatement of a Nonprofit Corporation (for failure to file a statement of continued existence) (109-RENN)
(4) <input type="checkbox"/> Reinstatement of a Registered Partnership Having Limited Liability (for failure to file annual or biennial reports) (112-PLR) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES		(5) <input type="checkbox"/> Reinstatement of a Professional Corporation (for failure to file annual or biennial reports) (110-RENP) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES

Complete ALL of the general information in this section for the box checked above.

Name of Entity Sociologists For Women in Society

Charter or Registration No. 936555

Cancellation Date The entity was canceled on (list date): April, 29, 2007
(Date)

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

Name and Address of New Agent (if applicable)

(Name) _____

(Street) _____

(City) _____ Ohio _____
(State) (Zip Code)

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

ACCEPTANCE OF APPOINTMENT

The Undersigned, _____, named herein as the Statutory agent for, _____, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: _____
(Statutory Agent)

REQUIRED
Must be authenticated (signed)
by an authorized representative
(See Instructions)

[Signature]
Authorized Representative

9/14/07
Date