

12/07/2007

DOCUMENT ID 200734002156

DESCRIPTION MERGER/DOMESTIC (MER)

PENALTY

CERT

Receipt

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

RITTER & RANDOLPH LLC 105 EAST FOURTH STREET STE 1200 CINCINNATI, OH 45202

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1742295

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

NEW HOPE BAPTIST CHURCH

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

Document(s)

MERGER/DOMESTIC

Document No(s):

200734002156



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 1st day of January, A.D. 2008.

Ohio Secretary of State

DATE: 12/07/2007 DOCUMENT ID DESCRIPTION MERGED OUT OF EXISTENCE (MEX)

FILING

EXPED .00 PENALTY .00 CERT .00 COPY .00

Receipt

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

RITTER & RANDOLPH LLC 105 EAST FOURTH STREET STE 1200 CINCINNATI, OH 45202

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

338213

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

PLEASANT RUN FIRST BAPTIST CHURCH

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

Document(s)

MERGED OUT OF EXISTENCE

Document No(s):

200734002156

STORE TABLE

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 1st day of January, A.D. 2008.

Ohio Secretary of State

Doc ID -->

200734002156

DATE: 12/07/2007

DOCUMENT ID DESCRIPTION MERGED OUT OF EXISTENCE (MEX)

FILING

EXPED PENALTY CERT

COPY

Receipt

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

RITTER & RANDOLPH LLC 105 EAST FOURTH STREET STE 1200 CINCINNATI, OH 45202

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

12422

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

THE LINCOLN PARK BAPTIST CHURCH OF CINCINNATI

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

Document(s)

Document No(s):

MERGED OUT OF EXISTENCE

200734002156



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 1st day of January, A.D. 2008.

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)

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

I, SURVIVING ENTITY

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 1329
Columbus, OH 43216
Columbus, OH 43216

9- 33**0 1007**

CERTIFICATE OF MERGER

(For Domestic or Foreign, Profit or Nonprofit)
Filing Fee \$125.00

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and toan, limited liability companies, limited partnerships and/or partnerships with limited liability, desiring to effect a merger, set forth the following facts:

A. The	name of the entity surviving the merger is:	
New	Hope Baptist Church	
B. Nam	ne Change: As a result of this merger, the name of the sun	viving entity has been changed to the following:
(Com	plete only if name of surviving entity is changing through the merger)	
C. The	surviving entity is a: (Please check the appropriate box	and fill in the appropriate blanks)
	Domestic (Ohio) For-Profit Corporation, charter number	
☑	Domestic (Ohio) Non-Profit Corporation, charter number	1742295
	Foreign (Non-Ohio) Corporation incorporated under the law and licensed to transact business in the State of Ohio und	
	Foreign (Non-Ohio) Corporation incorporated under the lat and NOT licensed to transact business in the state of	
	Domestic (Ohio) Limited Liability Company, with registration	on number
_	Foreign (Non-Ohio) Limited Liability Company organized under the and registered to do business in the State of Ohio under registrate.	
	Foreign (Non-Ohio) Limited Liability Company organized under the and NOT registered to do business in the State of Ohio.	ne laws of the state/country of
	Domestic (Ohio) Limited Partnership, with registration nun	nber
	Foreign (Non-Ohlo) Limited Partnership organized under the laws	s of the state/country of

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and registered to do business in the state of Ohio under registration number

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☐ Foreign (Non-Ohio) Limited Partnership organized u and NOT registered to do business in the state of O		
☐ Domestic (Ohio) Partnership having limited lia	bility, with the registration number	
☐ Foreign (Non-Ohio) Partnership having limited	liability organized under the laws of th	ne state/country of
and registered to do	business in the state of Ohio under reg	gistration number
Foreign (Non-Ohio) Partnership having limited liabil	ity organized under the laws of the state/co and NOT registered to do business in the	
Foreign (Non-Ohio) Non-Profit incorporation under and licensed to transact business in the state of Oh		
Foreign (Non-Ohio) Non-Profit incorporation under and not licensed to transact business in the state o		
☐ General partnership not registered with the sta	ate of Ohio	
MERGING ENTITY The name, charter/license/registration number, type or respectively, of which is the entities merging out of exial merging entities, please attach a separate sheet listing (Please list the Ohio charter, license/registration no	stence are as follow(bithis is insufficier g the merging entitiès	
Name / charter, license or registration number	State/Country of Organization	Type of Entity
Pleasant Run First Baptist Church / 338213	Ohio	Church
The Lincoln Park Baptist Church of Cincinnati / 12422		Church
MEDOED ADDEEMENT ON EU F		
MERGER AGREEMENT ON FILE The name and mailing address of the person or entity agreement of merger upon written request:	from whom/which eligible persons ma	ay obtain a copy of the
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq.	105 E. Fourth Street, Suite 1200	
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq. (name)	105 E. Fourth Street, Suite 1200 (street) NOTE: P.O. Box Addresses	
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq.	105 E. Fourth Street, Suite 1200	s are NOT acceptable.
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq. (name) Cincinnati	105 E. Fourth Street, Suite 1200 (street) NOTE: P.O. Box Addresses Ohio 45202 (state) (zip co	s are NOT acceptable. de) t be a date on or
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq. (name) Cincinnati (city, village or township) EFFECTIVE DATE OF MERGER This merger is to be effective on: January 1, 2008 after the date of filling; the effective date of the merger specified, the date of filling will be the effective date of	105 E. Fourth Street, Suite 1200 (street) NOTE: P.O. Box Addresses Ohio 45202 (state) (zip co (if a date is specified, the date must reannot be earlier than the date of filling it the merger).	s are NOT acceptable. de) t be a date on or ng, if no date is rger. mpliance with the laws
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq. (name) Cincinnati (city, village or township) EFFECTIVE DATE OF MERGER This merger is to be effective on: January 1, 2008 after the date of filling; the effective date of the merger specified, the date of filling will be the effective date of the laws of the state or country under which each contribution of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized.	105 E. Fourth Street, Suite 1200 (street) NOTE: P.O. Box Addresses Ohio 45202 (state) (zip co (if a date is specified, the date must reannot be earlier than the date of filling it the merger).	s are NOT acceptable. de) t be a date on or ng, if no date is rger. mpliance with the laws
The name and mailing address of the person or entity agreement of merger upon written request: Mary Ann Jacobs, Esq. (name) Cincinnati (city, village or township) EFFECTIVE DATE OF MERGER This merger is to be effective on: January 1, 2008 after the date of filling; the effective date of the merger specified, the date of filling will be the effective date of the laws of the state or country under which each contribution of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized, and the person of the state under which it is organized.	105 E. Fourth Street, Suite 1200 (street) NOTE: P.O. Box Addresses Ohio 45202 (state) (zip co (if a date is specified, the date must reannot be earlier than the date of filling it the merger).	s are NOT acceptable. de) t be a date on or ng, if no date is rger. mpliance with the laws

551

ized to conduct business in the state of Of CCEPTANCE OF AGENT he undersigned, named herein as the statu	,
(city, village or township) om MUST be completed if the surviving e- zed to conduct business in the state of Of CCEPTANCE OF AGENT e undersigned, named herein as the state	(Zip code) Intity is a foreign entity which is not licensed, registered or otherwise thio)
(city, village or township)	ntity is a foreign entity which is not licensed, registered or otherwise hio)
The undersigned, named herein as the stati acknowledges and accepts the appointment	
	t of statutory agent for said entity.
	Signature of Agent <u>Jane Lavis</u>
e acceptance of agent must be completed by nged, or the named agent differs in any way	r the surviving entities if through this merger the statutory agent has from the name currently on record with the Secretary of State.)
. STATEMENT OF MERGER Upon filing, or upon such later date as spec listed surviving entity	cified herein, the merging entity/entities listed herein shall merge into the
. AMENDMENTS The articles of incorporation, articles of orgonation in the properties of the transfer of tr	anization, certificate of limited partnership or registration of partnership rm) of the surviving domestic entity have been amended. ☑ No Changes
against the entity may be served in the is:	e following as its statutory agent upon whom process, notice or demand state of Ohio. The name and complete address of the statutory agent (street) NOTE: P.O. Box Addresses are NOT acceptable.
(name)	(41-1)
(city, village or township)	, Ohio
limited partnership, or partnership havi statutory agent listed above as long as Secretary of State of Ohio if the agent limited liability company, limited partne agent when required to do so, or if the	on, bank, savings bank, savings and loan, limited liability company, ing limited liability irrevocably consents to service of process on the sethe authority of the agent continues, and to service of process upon the cannot be found, if the corporation, bank, savings bank, savings and loan, arship, or partnership having limited liability fails to designate another foreign corporation's, bank's, savings bank's, savings and loan's, limited 's or partnership having limited liability's license or registration to do

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(a.)) The name of the Foreign Nationally/Federally chartered bank, savings bank, or savings and loan association is					
(b.)) The name(s) of any Trade Name(s) under which the corporation will conduct business:					
(c.)	The location of the main office (non	n-Ohio) shall be:				
	(street address)	NOTE: P.O. B	ox Addresses are NOT a	cceptable.		
	(city, township, or viilage)	(county)	(state)	(zip code)		
(d.)	The principal office location in the s	state of Ohio shall be:				
	(street address)	NOTE: P.O. B	ox Addresses are NOT a	cceptable.		
			Ohio			
	(Diago note if there will not be	(county)	(state)	(zip code)		
(e.)	(Please note, if there will not be The corporation will exercise the fo (Please provide a brief summary of	an office in the state of Oh	io, please list none	.)		
. For (If t	The corporation will exercise the fo	an office in the state of Oh ollowing purpose(s) in the sta f the business to be conduct Company ed liability company, the follo	ate of Ohio: ed; a general clause	is not sufficient)		
. For (If t	The corporation will exercise the for (Please provide a brief summary of the corporation will exercise the for (Please provide a brief summary of the corporation will exercise the formula of the corporation will exercise the corpor	an office in the state of Ohollowing purpose(s) in the state of the business to be conducted the business to be conducted. Company ed liability company, the following in its state of organizerom.	ate of Ohio: ed; a general clause bwing information mu	is not sufficient)		
. For (If t (a.)	The corporation will exercise the form (Please provide a brief summary of the corporation will exercise the form (Please provide a brief summary of the gualifying Limited Liability (Indianal Corporation) the name of the limited liability corporation will be corporated to the limited liability corporated the liability c	an office in the state of Ohollowing purpose(s) in the state of the business to be conduct the business to be conduct Company ed liability company, the following in its state of organization liability company desires to organized or registered on	ate of Ohio: ed; a general clause bwing information mu	is not sufficient)		

	(street address)	NOTE: P.O. Bo	ox Addresses are NOT a	cceptable.	
	(city, township, or village)		(state)	(zip code)	
tŀ	eign Qualifying Limited Partnership ne qualifying entity is a foreign limited partnership, the following information must be completed). The name of the limited partnership is				
ı.)	The limited partnership was formed	on			
c.)	The address of the office of the limit	ed partnership in its state/co	ountry of organizatio	on is:	
	(street address)	NOTE: P.O. Bo	ox Addresses are NOT a	ecceptable.	
	(city, township, or village)	(county)	(state)	(zip code)	
d.)	The limited partnership's principal of	ffice address is:			
	(street address)	NOTE: P.O. Bo	ox Addresses are NOT	acceptable.	
	(city, township, or village)	(county)	(state)	(zip code)	
e.)	The names and business or residen follows:	ce addresses of the Genera	al partners of the pa	rtnership are as	
	Name	Address			
	iont canno to assorthic item, please attach a	eparate sheet listing the general pa	artners and their respecti	ve addresses)	
	The address of the office where a lis			esses of the	
				esses of the	
	The address of the office where a lis	capital contributions is to b			

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The limited partnership hereby certifies that it shall maintain said records until the registration of the limited partnership in Ohio is canceled or withdrawn.

(street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, township, or village) (state) (state) (zip code) The name and address of a statutory agent for service of process in Ohio is as follows: (name) (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, village or township) (city, village or township) (zip code) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed		The name of the partnership shall be			
(street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, village or township) (2.) The address of the partnership's principal office (Non-Ohio): (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, township, or village) (state) (city, township, or village) (city, village or township)		Please complete the following appropriate section (either item b(l) or b(2)):			
(city, viliage or township) (city, viliage or township) (2.) The address of the partnership's principal office (Non-Ohio): (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, township, or village) (state) (state) (partnership or village) (state) (state) (state) (state) (partnership or village) (city, township, or village) (state) (state) (partnership or village) (city, township, or village) (city, township, or village) (state) (partnership or village) (city, township, or village)		(1.) The address of the partnership's principal office in Ohio is:			
(city, viliage or township) (zip code) If the partnership does not have a principal office in Ohio, then items b2 must be completed) (2.) The address of the partnership's principal office (Non-Ohio): (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, township, or village) (state) (zip code) 1.) The name and address of a statutory agent for service of process in Ohio is as follows: (name) (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, village or township) (zip code) 1.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been		(street address)	NOTE: P.O. Box Addresses are NOT acceptable.		
(2.) The address of the partnership's principal office (Non-Ohio): (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, township, or village) (state) (state) (zip code) 1.) The name and address of a statutory agent for service of process in Ohio is as follows: (name) (street address) NOTE: P.O. Box Addresses are NOT acceptable. (city, village or township) (city, village or township) (zip code) 1.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed					
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(streel address) NOTE: P.O. Box Addresses are NOT acceptable. , Ohio			, , , , , , , , , , , , , , , , , , , ,		
(street address) NOTE: P.O. Box Addresses are NOT acceptable. Ohio (city, village or township) (zip code) 1.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed	.)	The name and address of a statutory	agent for service of process in Ohio is as follows:		
, Ohio, Ohio, Ohio, Ohio, Ohio, Ohio, Ohio		(name)			
, Ohio, Ohio, Ohio, Ohio, Ohio, Ohio, Ohio					
(city, village or township) (zip code) I.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed		(street address)	NOTE: P.O. Box Addresses are NOT acceptable.		
I.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed					
formed		(.)6dl			
.) The business which the partnership engages in is:			(zip code)		
e.) The business which the partnership engages in is:	l.)	Please indicate the state or jurisdiction	(zip code)		
	l.)	Please indicate the state or jurisdiction	(zip code)		
	•	Please indicate the state or jurisdiction formed	(zip code) on in which the Foreign Limited Liability Partnership has been		
	•	Please indicate the state or jurisdiction formed	(zip code) on in which the Foreign Limited Liability Partnership has been		
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		Please indicate the state or jurisdiction formed	(zip code) on in which the Foreign Limited Liability Partnership has been		
		Please indicate the state or jurisdiction formed	(zip code) on in which the Foreign Limited Liability Partnership has been		

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The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

Pleasant Run First Baptist Church	
Exact name of entity)	(Exact name of entity)
x all our	Ву:
ts: Treasurer/Trustee	lts:
Date: <u>///20/01</u>	Date:
The Lincoln Park Baptist Church of Cincinnati	
Exact name of entity)	(Exact name of entity)
sy: Chalatter Susong	Ву:
ts: Trustee	its:
Date: 11/20/07	Date:
New Hope Baptist Church	New Hope Baptist Church
(Exact name of entity)	(Exact name of entity)
By: Jane Davie	By: lay of un
Its: Trustee/Chairman	Its: Pastor
Date: //-20-07	Date: 11/ 20/07
(Exact name of entity)	(Exact name of entity)
Ву:	Ву:
its:	Its:
Date:	Date:
, a,	
(Exact name of entity)	(Exact name of entity)
Ву:	Ву:
Its:	Its: