

DATE: 01/24/2008

DOCUMENT ID 200802302324

NT ID DESCRIPTION 2324 DOMESTIC/REINSTATEMENT (REN)

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RATHWEG INSURANCE ASSOCIATES 2212 S PATTERSON BLVD KETTERING, OH 45409

# STATE OF OHIO

## CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

183151

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

TA-WA-SI CLUB, INC., DAYTON, OHIO

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

Document(s)

DOMESTIC/REINSTATEMENT

Document No(s):

200802302324



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 18th day of January, A.D. 2008.

Ohio Secretary of State



#### Prescribed by:

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 Expedite this Form: (Select One)

#### dail Form to one of the Following: I

PO Box 1390

Yes Columbus, OH 43216
Requires an additional fee of \$100 \*\*\*

PO Box 788  $\mathbf{O}_{\mathsf{No}}$ 

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)		<del></del>		
(1) Reinstatement & Appointment		(2) Reinstatement & Appointment of		(3)  Reinstatement of a Nonpro.	
of Agent		Agent for a Foreign Corporation		Corpo	
(for failure to maintain a statutory agent) (108-REN)		(for failure to maintain a statut (111-FREA)		(for failure to file a statement of continued existence) (109-RENN)	
4) Reinstatement of	a Registered Pa	rtnership Having	(5) Reinstate	ement of a Pr	ofessional Corporation
Limited Liability		(for failure to file at		nnual or biennial reports)	
for failure to file annual or bien THIS FORM MUST BE ACCOP BIENNIAL REPORTS WITH FI	MPANIED BY ALL D	ELINQUENT ANNUAL OR THIS FORM		NP) RM MUST BE ACCOMPANIED BY ALL DELINQUENT OR BIENNIAL REPORTS WITH FILING FEES	
Complete <u>ALL</u> of the gen	eral information	in this section for the box	checked above.		·
Name of Entity	TA-WA-SI	Club, Inc., Dayton, Ol	nio		
Charter or					
Registration No.		183151			
Cancellation Date	The entity was	canceled on (list date):	 12/1	5/1985	
		(Date)			
Complete the information	in this costion i	box (1) or (2) is checked.	<u> </u>		
	in uns secuon n	DOX (1) OF (2) IS CHECKED.	_d		
Name and Address of					
New Agent (If applicable)		(Name)			
		(Street)	NOTE: P.O. Box Addresses are NOT acceptable.		
				Ohio	
		(City)		(State)	(Zip Code)
		ACCEPTANCE OF A	PPOINTMENT		
The Undersigned,					, named herein as
the Statutory agent for,					
hereby acknowledges a	nd accepts the a	ppointment of statutory a	gent for said entit	ty.	
	0:				
	Signature	·	401.4.1	0	
			(Statutory A	gent)	
REQUIRED		0 100			
Must be authenticated (			a Tra	ussiel	1/16/2007
by an authorized repres	entative	I have been been been been	1 7	- ,	

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Last Revised: May 2002