DATE: 10/27/2009 DOCUMENT ID 200929901170

DESCRIPTION DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)

FILING

EXPED

PENALTY

CERT

COPY

Receipt

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

NEW HOPE CHRISTIAN CHURCH MAHONING COUNTY 51 N. WICKLIFFE CIRCLE AUSTINTOWN, OH 44515

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

962188

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

NEW HOPE CHRISTIAN CHURCH OF MAHONING COUNTY, OHIO

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

Document(s)

Document No(s):

DOMESTIC AGENT SUBSEQUENT APPOINTMENT

200929901170



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 26th day of October, A.D. 2009.

Ohio Secretary of State



Form 521 Prescribed by the: Ohio Secretary of State

Central Ohio: (614) 466-3910 Toll Free: (877) SOS-FILE (767-3453)

www.sos.state.oh.us Busserv@sos.state.oh.us Expedite this form: (select one) Mail form to one of the following:

Expedite

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

Non Expedite PO Box 788

Columbus, OH 43216

STATUTORY AGENT UPDATE Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)		
(1) Subsequent Appointment of Age Corp (165-AGS) LP (165-AGS) LLC (171-LSA)	ent (2) Change of Address of an Agent Corp (145-AGA) LP (145-AGA) LLC (144-LAD)	(3) Resignation of Agent
Name of Entity How Ho	ope Christian Church o-	+ Mahourny County Offo
Charter, License or Registration	no. <u>962188</u>	
Name of Current Agent	George Rood Cdece	raged)
Complete the information in this	section if box (1) is checked	
of New Agent N	David Ballenger lame of Agent	
	3570 Oqhviaw Do Mailing Address	5,
	State Ohlo State	4442 8 Zip Code

Form 521

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Last Revised: 12/01/2008

Complete the information in this section if box (1) is checked and business is an Ohio entity					
ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT					
The Undersigned, Name of Agent, named herein as the					
Statutory agent for, New Hope Christian Chusch of Mahoning Lo., hereby acknowledges Name of Business Entity					
and accepts the appointment of statutory agent for said entity. Signature: Statutory Agent					
☐ If the agent is an individual using a P.O. Box, the agent must check this box to confirm that the agent is an Ohio resident.					
Complete the information in this sect	on if box (2) is checked				
New Address of Agent Mailing Address					
	Ohio				
City	State	Zip Code			
☐ If the agent is an individual using a P.O. Box, check this box to confirm that the agent is an Ohio resident.					
Complete the information in this sect	ion if hox (3) is checked				
Complete the information in this section if box (3) is checked					
The agent of record for the entity identified on page 1 resigns as statutory agent.					
Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed.					
Mailing Address					
	<u>Ohio</u>				
	<u>Q1110</u>				
City	State	Zip Code			

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Last Revised: 12/01/2008

Doc ID -->

	s form to the Ohio Secretary of State, the undersigne	ed hereby certifies that
he or she has the requisite au	uthority to execute this document	10/22/2009
REQUIRED	KAWAIX I SULLEN	Υ -/-/-
Must be authenticated	Authorized Representative	Date '
(signed) by an authorized representative	DAVID R. Ballengi	6√
(See Instructions)	Print Name	
	Authorized Representative	Date
	Print Name	