



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/29/2010	201008500582	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	.00	.00	.00	.00

Receipt

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

MANTECH COMMUNICATIONS
3043 WOLD AVE.
CINCINNATI, OH 45206

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1924949

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

MANUFACTURING TECHNOLOGY COMMUNICATIONS, INC.

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

Document(s):

DOMESTIC ARTICLES/FOR PROFIT

Document No(s):

201008500582



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 23rd day of March, A.D. 2010.

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)

Mail Form to one of the Following:

- ☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
- ☐ No PO Box 670
Columbus, OH 43216

INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Nonprofit)

Filing Fee \$125.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

<input checked="" type="checkbox"/> (1) Articles of Incorporation Profit (113-ARF) ORC 1701	<input type="checkbox"/> (2) Articles of Incorporation Nonprofit (114-ARN) ORC 1702	<input type="checkbox"/> (3) Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation MANUFACTURING TECHNOLOGY COMMUNICATIONS, INC. , INC.

SECOND: Location CINCINNATI HAMILTON
(City) (County)

Effective Date (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

THE PURPOSE OF THE CORPORATION IS TO PROVIDE INFORMATIONAL AND MANUFACTURING SUPPORT AND GUIDANCE TO THE MANUFACTURING COMMUNITY AND OTHER ORGANIZATIONS INCLUDING ACADEMIA, FEDERAL AND STATE GOVERNMENTS, ETC.

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any)

100 COMMON \$1.00
(No. of Shares) (Type) (Par Value)

(Refer to instructions if needed)

Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as initial Directors.

JOHN KOHLS
(Name)
3043 WOLD AVE.
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
CINCINNATI OHIO 45206
(City) (State) (Zip Code)

DOLLY KOHLS
(Name)
3043 WOLD AVE.
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
CINCINNATI OHIO 45206
(City) (State) (Zip Code)

DOUG KOHLS
(Name)
1719 OLD FARM DRIVE
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
LOVELAND OHIO 45040
(City) (State) (Zip Code)

REQUIRED

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

John B. Kohls
Authorized Representative
JOHN B. KOHLS
(print name)

3-21-2010
Date

Dolly R. Kohls
Authorized Representative
DOLLY R. KOHLS
(print name)

3-22-10
Date

Doug Kohls
Authorized Representative
DOUG KOHLS
(print name)

3/22/2010
Date

Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of MANUFACTURING TECHNOLOGY COMMUNICATIONS, INC., hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

JOHN KOHLS
(Name)
3043 WOOD AVE.
(Street) NOTE: P.O. Box Addresses are NOT acceptable.
CINCINNATI, Ohio 45206
(City) (Zip Code)

Must be authenticated by an authorized representative

John B. Kohls
Authorized Representative

3-21-2010
Date

Douglas R. Kohls
Authorized Representative

3/22/10
Date

Doug Kohls
Authorized Representative

3/22/2010
Date

ACCEPTANCE OF APPOINTMENT

The Undersigned,

JOHN B. KOHLS, named herein as the

Statutory agent for,

MANUFACTURING TECHNOLOGY COMMUNICATIONS, INC.

, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: John B. Kohls
(Statutory Agent)