



DATE: 04/26/2011	DOCUMENT ID 201111600093	DESCRIPTION BIENNIAL REPORT OF PROFESSIONAL CORP (08A)	FILING 25.00	EXPED .00	PENALTY	CERT .00	COPY .00
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Receipt

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

SLIWINSKI LAW CO L.P.A.
ATTN: MICHAEL SLIWINSKI
4322 CHANTICLEER DR.
FAIRVIEW PARK, OH 44126

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**1575605**

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

SLIWINSKI LAW CO L.P.A.

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

Document(s)

BIENNIAL REPORT OF PROFESSIONAL CORP

Document No(s):

201111600093

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 21st day of April, A.D.
2011.

Ohio Secretary of State



**Form 520 Prescribed by the:
Ohio Secretary of State**

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

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☐ Expedite PO Box 1390
Columbus, OH 43216

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BIENNIAL REPORT

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

(1) ☒ 2010 (indicate year) Biennial Report
of Professional Corporation (102-YRA)
(even-numbered years)

List Profession

ATTORNEY

(2) ☐ _____ (indicate year) Biennial Report
of Limited Liability Partnership (103-YRL)
(odd-numbered years)

If foreign limited liability partnership, provide
jurisdiction of formation _____

Name of Entity

SLIWINSKI LAW CO L.P.A.

Charter or Registration Number

1575605

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

Shareholders of Professional Corporation

Authenticating this form constitutes a certification that all of the below listed shareholders are duly licensed or otherwise legally authorized to render the professional services in this state in the profession that is listed above.

Name

MICHAEL SLIWINSKI

Address

4322 CHANTICLEER DR.

FAIRVIEW PARK, OH 44126

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

Address of the partnership's chief executive office:

Mailing Address

City

State

Zip Code

If the chief executive office is not in Ohio, the address of any office of the partnership in Ohio:

Mailing Address

City

Ohio
State

Zip Code

If the partnership does not have an office in Ohio, the name and address of the partnership's current agent for service of process:

Name of Agent

Mailing Address

City

Ohio
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.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

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

Signature

Print Name

Date