



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/04/2012	201233801004	DISSOLUTION (DIS)	50.00	.00		.00	.00

Receipt

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

STEVEN W. MERSHON
P.O. BOX 10
GRANVILLE, OH 43023-0010

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

1513369

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
CITY COUNTY HOLDING CO.

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

Document(s)
DISSOLUTION

Document No(s):
201233801004



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 31st day of December,
A.D. 2012.

Ohio Secretary of State



Form 560 Prescribed by:

JON HUSTED
Ohio Secretary of State

 Central Ohio: (614) 466-3910
 Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

 Regular Filing (non expedite)
 P.O. Box 1329
 Columbus, OH 43216

 Expedite Filing (**Two-business day processing time requires an additional \$100.00.**)
 P.O. Box 1390
 Columbus, OH 43216

Certificate of Dissolution
(Nonprofit, Domestic Corporation)
Filing Fee: \$50
(139-DISM (Members) & 175-DIST (Directors))

Complete the following information.

The corporation named below has adopted a resolution of dissolution.

Name of Corporation Charter Number

Location of Principal Office in Ohio

City

County

State

Names and addresses of the directors.

Name

Address

Name

Address

Name

Address

2012 NOV 30 PM 2:49

Names and addresses of the officers.

Steven D. Gladman

Name

110 North 17th Street, Columbus, Ohio 43203

Address

Name

Address

Name

Address

Name and address of the Statutory Agent.

Steven W. Mershon

Name

128 S. Main St., P.O. Box 10

Address

Granville

City

Ohio

State

43023-0010

Zip Code

Please complete this section if the corporation is appointing a new agent.

ACCEPTANCE OF APPOINTMENT

The Undersigned,

,named herein as the

Statutory Agent Name

Statutory agent for,

Corporation Name

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

Statutory Agent Signature

Individual Agent's Signature/Signature on behalf of Corporate Agent

☒ If the agent is an individual using a P.O. Box, check this box to confirm the agent is an Ohio resident.

The date of dissolution if other than the filing date

12/31/2012

MM/DD/YYYY

Note: The date of dissolution must be on the date of filing, or a later date that is not more than 90 days after the date of filing, pursuant to Ohio Revised Code section 1702.47(H).

Check the appropriate box and provide information as required:

☐ The resolution of dissolution was adopted by the **Directors**. Pursuant to Ohio Revised Code section 1702.47(C), directors may adopt a resolution in the following cases, please check the box to state the proper statement of the basis for the adoption.

The resolution of dissolution was adopted:

- ☐ When the corporation has been adjudged bankrupt or has made a general assignment for the benefit of the creditors;
- ☐ By leave of the court, when a receiver has been appointed in a general creditor's suit or in any suit in which the affairs of the corporation are to be wound up;
- ☐ When substantially all of the assets have been sold at judicial sale or otherwise; or
- ☐ When the period of existence of the corporation specified in its articles has expired.

☒ The resolution of dissolution was adopted by the **Members** pursuant to Ohio Revised Code section 1702.47(D).

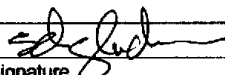
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Must be signed by an authorized officer, unless the officer fails to execute and file the certificate within 30 days after the adoption of the resolution, or upon any date specified in the resolution as the date upon which the certificate is to be filed, or upon the expiration of any period specified in the resolution as the period within which the certificate is to be filed, whichever is latest, in which event the certificate of dissolution may be signed by any three voting members and shall set forth a statement that the persons signing the certificate are voting members and are filing the certificate because of the failure of the officers to do so.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.


Signature

By (if applicable)

Steven D. Gladman, President

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Complete the information in this section.**AFFIDAVIT**

In lieu of dissolution releases from various governmental authorities for a Nonprofit Corporation, (ORC section 1702.47(G)(3)).

City County Holding Co.

Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate of Dissolution and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1702.47 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229	11/23/2012	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319	11/23/2012
		Overnight: P.O. Box 182413 Columbus, OH 43218-2413	Regular: P.O. Box 182413 Columbus, OH 43218-2413

Note: This affidavit must be signed by a person executing the certificate of dissolution or by an officer of the corporation.

Signature

sd gladman

Title

President

Steven D. Gladman

Name

110 North 17th Street

Mailing Address

Columbus

City

Ohio

State

43203

Zip Code

Acknowledged before me and subscribed in my presence on

11/23/2012

Date

Seal



STEVEN W. MERSHON

ATTORNEY AT LAW

Notary Public, State of Ohio

My Commission Has No Expiration Date

Section 147.03 ORC

Notary Public

Commission
Expires

No expiration

Date

Complete the information in this section.

AFFIDAVIT OF PERSONAL PROPERTY

State of Ohio

County of Franklin

SS:

Steven D. Gladman

Name of Officer

, being first duly sworn, deposes and says that she/he is

President

Title of Officer

of

City County Holding Co.

Name of Corporation

and this affidavit is made in compliance with section 1702.47 of the Ohio Revised Code.

That said corporation has: (Check one (1) of the following)

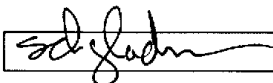
☒ A. No personal property in any county in the State of Ohio

☐ B. Personal property in the following county(ies)

and that the net assets of said corporation are sufficient to pay all personal property taxes accrued to date.

☐ C. corporation is of the type required to pay personal property taxes to state authorities only

Signature:



Title:

President

Acknowledged before me and subscribed in my presence on

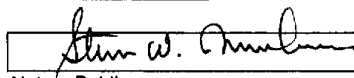
Date

11/23/2012

Seal



STEVEN W. MERSHOW
ATTORNEY AT LAW
Notary Public, State of Ohio
My Commission Has No Expiration Date
Section 147.03 ORC


Notary Public

Expiration date of Notary Public's Commission Date

No expiration