

DATE: 10/30/2013

DOCUMENT ID 201330201660

DESCRIPTION DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)

FILING 25.00 XPED PENALTY

CERT .00 COPY

Receipt

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

MARIEMONT COMMUNITY CHURCH LOIS BARBRO 3908 PLAINVILLE ROAD CINCINNATI, OH 45227

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

130961

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

MARIEMONT COMMUNITY CHURCH

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

Document(s)

Document No(s):

DOMESTIC AGENT SUBSEQUENT APPOINTMENT

201330201660

Effective Date: 10/28/2013



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 30th day of October, A.D. 2013.

Ohio Secretary of State

n Housted



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:

PO Box 1390 C Expedite

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

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Columbus, OH 43216

STATUTORY AGENT UPDATE Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)		
(1) Subsequent Appointment of Agent	(2) Change of Address of an Agent	(3) Resignation of Agent
Corp (165-AGS)	Corp (145-AGA)	Corp (155-AGR)
LP (165-AGS)	LP (145-AGA)	LP (155-AGR)
LLC (171-LSA)	LLC (144-LAD)	LLC (153-LAG)
		Partnership (155-AGR)
Name of Entity MARIE	MONT COMMUNITY	CHURCH
Charter, License or Registration No.	130961	
Name of Current Agent	TARRY BADANES	
Complete the information in this section	on if box (1) is checked]
	DIS BARBEO of Agent	2013
	908 PLAINVILLE	20130CT 28
City	NTI Ohio O H	45227 Zip Code N

Form 521

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Last Revised: 12/01/2008

ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT The Undersigned,
The Undersigned,
Statutory agent for, MARIEMONT COMMUNITY CHURCH, 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 section if box (2) is checked New Address of Agent
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 section if box (2) is checked New Address of Agent
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 section if box (2) is checked New Address of Agent
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 section if box (2) is checked New Address of Agent
that the agent is an Ohio resident. Complete the information in this section if box (2) is checked New Address of Agent
New Address of Agent
New Address of Agent
Mailing Address
<u>Ohlo</u>
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 Ohlo resident.
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
Manning Address
Ohio
City State Zip Code

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Last Revised: 12/01/2008

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

Print Name

| 10/23/13 | Date |