DOC ID ----> 200212902234

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
05/10/2002	200212902234	TRADE NAME/ORIGINAL FILING (RNO)	50.00	.00	.00	.00	.00

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

PICKRELL, SCHAEFFER & EBELING CO., L.P.A.
2700 KETTERING TOWER
40 N. MAIN ST
DAYTON, OH 45423-2700

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

1317403

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

BUCKEYE FIRE SAFETY PRODUCTS

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

Document(s)	Document No(s):
TRADE NAME/ORIGINAL FILING	**200212902234**

Date of First Use: 07/01/2001
Expiration Date: 05/09/2007

MEGACITY FIRE PROCTECTION, INC.
8210 EXPANSION WAY
DAYTON, OH 45424

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 9th day of May, A.D. 2002.

J. Kenneth Blackwell

Ohio Secretary of State

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Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

2002 MAY -9

www.state.oh.us/sos
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)	
Mail Required in the Columbus	
○ Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of $100 ***
◉ No	PO Box 670 Columbus, OH 43216

NAME REGISTRATION

(For Domestic Profit or Non-Profit)
Filing Fee $50.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☑ Trade Name (187-RNO)	(2) ☐ Fictitious Name (189-NFO)	(3) Name Reservation (180-NRO)
Date of first use: July 1, 2001 (MM/DD/YYYY)		☐ Original ☐ Renewal Registration No.

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

The exact name being registered or reported is: Buckeye Fire Safety Products

The Registrant is (Check Appropriate Box)

- ☐ Individual
- ☐ Limited Partnership: Reg. No.
- ☐ Ohio Limited Liability Co., Reg. No.
- ☑ Ohio Corporation, Charter No. 671495
- ☐ General Partnership
- ☐ Other
- ☐ Foreign Corporation incorporated in the state of ___ holding Ohio license no. ___
- ☐ Unincorporated Association
- ☐ Foreign Limited Liability Co. holding Ohio Reg. No. ___ organized in the state of ___

The name of the registrant designated above is

Megacity Fire Protection, Inc.

NOTE: Where the registrant is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed on Ohio under an assumed name, both the assumed name and actual corporate title of such corporation must appear on this line.

The business address of the registrant is

8210 Expansion Way
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

Dayton	Montgomery	Ohio	45424
(City)	*(County)*	*(State)*	*(Zip Code)*

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

Complete only if registrant is a general partnership

NAME OF ALL GENERAL PARTNERS	COMPLETE RESIDENTIAL ADDRESSES (including zip code)
N/A	

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and actual corporate title of such general partner.

The nature of the business conducted by the registrant under the trade or fictitious name is (please be specific)

sell, lease, install and service fire prevention equipment

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

☐ Please reserve the name listed below. (only one name per form)

☐ Please reserve the first name available in the order of my preference.

I understand that I am not guaranteed the reservation **UNTIL I RECEIVE WRITTEN CONFIRMATION FROM THE SECRETARY OF STATE'S OFFICE STATING THAT THE NAME HAS BEEN REGISTERED TO ME.**

The name reservation is valid for a period of 180 days.

(First Choice)

(Second Choice)

(Third Choice)

(Applicant) *(Print Name)*

(Address)

(City, State and Zip Code)

Must be authenticated by an authorized representative

Kathleen Gagnon
Authorized Representative

5-7-02
Date

Kathleen Gagnon

Authorized Representative

Date

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Prescribed by **J. Kenneth Blackwell**

Please obtain fee amount and mailing instructions from the **Forms Inventory List** (using the 3 digit form # located at the bottom of this form). To obtain the **Forms Inventory List** or for assistance, please call Customer Service:
Central Ohio: (614)-466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

02 MAY -9 PM 2:0

CONSENT FOR USE OF SIMILAR NAME

(Where consenting entity is a corporation)

Buckeye Fire Safety Products, Inc.
(Name of Corporation giving consent)

(Charter/License Number) 673018

gives its consent to Megacity Fire Protection, Inc.
(Name of individual or proposed corporation receiving consent)

to use the name Buckeye Fire Safety Products

THIS DOCUMENT IS SIGNED BY ANY AUTHORIZED CORPORATE OFFICER

Date 6-11-01

Signature: X Teri Frederick

Name: TERI L. FREDERICK

Title: Sec/Treasurer

[O.R.C 1701.05 (c)]