



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/18/2002	200229002564	FICTITIOUS NAME RENEWAL (NFR)	25.00	.00	.00	.00	.00

Receipt

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

STAFAST FOUNDATION
505 LAKE SHORE BLVD
PAINESVILLE, OH 44077

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

FN60718

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

THE SELLE FAMILY LIMITED PARTNERSHIP

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

Document(s)

FICTITIOUS NAME RENEWAL

Document No(s):

200229002564



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 17th day of October, A.D.
2002.

J. Kenneth Blackwell
Ohio Secretary of State



Prescribed by
J. KENNETH BLACKWELL, Secretary of State
30 East Broad Street, Lower Level
Columbus, Ohio 43266-0418

RENEWAL OF FICTITIOUS NAME REPORT

2002 OCT 17 PM 12:23

1. The Registration Number to be renewed is: **FN60718**
2. The fictitious name to be renewed is:
THE SELLE FAMILY LIMITED PARTNERSHIP
3. The date of original registration is: **January/26/1993**
4. The applicant is: (check appropriate item)
 - ☐ an individual
 - ☐ an Ohio corporation, Charter Number: _____
 - ☐ a foreign corporation, incorporated in the state of: _____
 - ☐ a General Partnership
 - ☐ a Limited Liability Company
 - ☒ a Limited Partnership; County in Ohio where certificate /application of limited partnership is filed is: Lake County
 - ☐ a Professional association
 - ☐ an association
 - ☐ a Society, Foundation, Federation or other organization

5. The name of the applicant designated in item 4 is:
The Selle Family Limited Partnership
(Note: When the applicant is a partnership, the name of the partnership must appear on this line)

6. The business address of the applicant is:
7767 Litchfield Dr.
(Street address only, P.O. Box not acceptable)
Mentor, Lake, Ohio, 44060
(City, Village or Township) (County) (State) (Zip Code)

7. Complete only if applicant is a partnership:

Names of All General Partners	Complete Residence Address
<u>DONALD S. Selle</u>	<u>7767 Litchfield Dr., Mentor, OH 44060</u>
<u>JOAN M. Selle</u>	<u>" " " "</u>
_____	_____
_____	_____

This document is signed by a corporate officer, general partner, association member or officer, or the individual applicant.

By: J. M. Selle