



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/24/2002	200229403058	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	.00	.00	.00	.00

Receipt

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

ELLORA'S CAVE, INC.
4427 MANNINGTON BLVD.
STOW, OH 44224

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

1347617

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

ELLORA'S CAVE PUBLISHING, INC.

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

Document(s)

DOMESTIC ARTICLES/FOR PROFIT

Document No(s):

200229403058



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 October, A.D.
2002.

J. Kenneth Blackwell
Ohio Secretary of State

Prescribed by **J. Kenneth Blackwell**

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

www.state.oh.us/sos

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

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☐ Yes PO Box 1390
 Columbus, OH 43216

*** Requires an additional fee of \$100 ***

☒ No PO Box 670
 Columbus, OH 43216

INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Non-Profit)

Filing Fee \$125.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☒ Articles of Incorporation Profit (113-ARF) ORC 1701	(2) ☐ Articles of Incorporation Non-Profit (114-ARN) ORC 1702	(3) ☐ Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation ELLORA'S CAVE PUBLISHING, INC.

SECOND: Location AMELIA CLERMONT
 (City) (County)

Effective Date (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
 (mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed
Publishing Company - we sell ebooks and paperbacks

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any) 100 Common \$1.00
 (No. of Shares) (Type) (Par Value)

(Refer to instructions if needed)

Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as initial Directors.

TINA ENGLER

(Name)

4427 MANNINGTON BLVD

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

STOW

(City)

OH

(State)

44224

(Zip Code)

CRIS BRASHEAR

(Name)

16 MALLARD

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

AMELIA

(City)

OH

(State)

45102

(Zip Code)

PATRICIA MARKS

(Name)

2496 19th ST.

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

CUYAHOGA FALLS

(City)

OH

(State)

44223

(Zip Code)

REQUIRED

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

Tina M. Engler

Authorized Representative

10-17-02

Date

TINA M. ENGLER

Print Name

Christina M. Brashear

Authorized Representative

10-11-02

Date

CHRISTINA M BRASHEAR

Print Name

Patty L. Marks

Authorized Representative

10/17/02

Date

Patty L. Marks

Print Name

Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Ellora's Cave Publishing, Inc., hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

Tina Engler

(Name)

4427 Mannington Blvd.

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

Stow

(City)

Ohio

44224

(Zip Code)

Must be authenticated by an authorized representative

Tina Engler

Authorized Representative

10-17-02

Date

Authorized Representative

Date

Authorized Representative

Date

ACCEPTANCE OF APPOINTMENT

The Undersigned,

Tina Engler

, named herein as the

Statutory agent for,

Ellora's Cave Publishing, Inc.

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

Signature:

Tina Engler

(Statutory Agent)