



|            |              |                                       |        |        |         |      |      |
|------------|--------------|---------------------------------------|--------|--------|---------|------|------|
| DATE:      | DOCUMENT ID  | DESCRIPTION                           | FILING | EXPED  | PENALTY | CERT | COPY |
| 11/27/2006 | 200633100242 | DOMESTIC ARTICLES/NON-PROFIT<br>(ARN) | 125.00 | 100.00 | .00     | .00  | .00  |

**Receipt**

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

JONES DAY  
ATTN: AMANDA COCHRAN  
P O BOX 165017  
COLUMBUS, OH 43216-5017

# STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, J. Kenneth Blackwell****1662287**

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

**OHIO TREASURER OF STATE INAUGURATION COMMITTEE, INC.**

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

Document(s)  
**DOMESTIC ARTICLES/NON-PROFIT**

Document No(s):  
**200633100242**



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 22nd day of November,  
A.D. 2006.

*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

**Expedite this Form:** (Select One)**Mail Form to one of the Following:**

- ☒ 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)**

|                                                                                               |                                                                                                              |                                                                                                                      |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <b>(1)</b> <input type="checkbox"/> Articles of Incorporation Profit<br>(113-ARF)<br>ORC 1701 | <b>(2)</b> <input checked="" type="checkbox"/> Articles of Incorporation Non-Profit<br>(114-ARN)<br>ORC 1702 | <b>(3)</b> <input type="checkbox"/> Articles of Incorporation Professional (170-ARP)<br>Profession _____<br>ORC 1785 |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|

**Complete the general information in this section for the box checked above.****FIRST:** Name of Corporation Ohio Treasurer of State Inauguration Committee, Inc.**SECOND:** Location Columbus Franklin  
(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 formedSee Attached.**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)

|                 |        |             |
|-----------------|--------|-------------|
| _____           | _____  | _____       |
| (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.

Harry J. Lehman

(Name)

5 Pickett Place

(Street)

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

New Albany

(City)

Ohio

(State)

43054

(Zip Code)

Antoinette F. Wilson

(Name)

1480 Dublin Road

(Street)

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

Columbus

(City)

Ohio

(State)

43215

(Zip Code)

Melissa K. Barnhart

(Name)

1000 Urlin Avenue, Unit 908

(Street)

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

Columbus

(City)

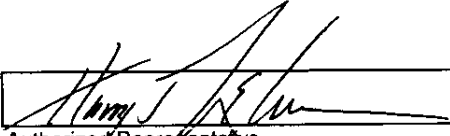
Ohio

(State)

43212

(Zip Code)

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



Authorized Representative

Harry J. Lehman

(Print Name)

11 / 22 / 06

Date



Authorized Representative

(Print Name)



Date



Authorized Representative

(Print Name)



Date

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 Ohio Treasurer of State Inauguration Committee, 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

Antoinette F. Wilson

(Name)

1480 Dublin Road

(Street)

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

Columbus

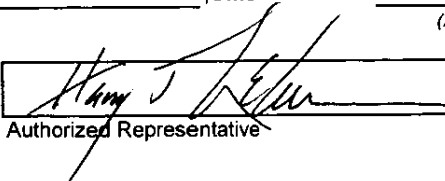
(City)

Ohio

43215

(Zip Code)

Must be authenticated by an  
authorized representative



Authorized Representative

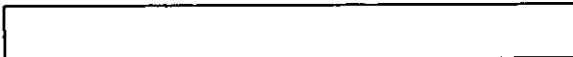
11/22/06

Date



Authorized Representative

Date



Authorized Representative

Date

### ACCEPTANCE OF APPOINTMENT

The Undersigned,

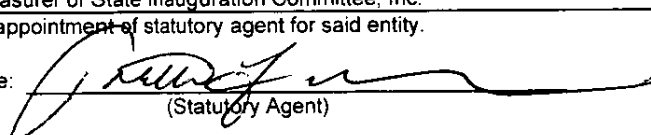
Antoinette F. Wilson

, named herein as the

Statutory agent for,

Ohio Treasurer of State Inauguration Committee, Inc.

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

Signature: 

(Statutory Agent)

**THIRD.** The Corporation is organized and shall be operated exclusively for the promotion of social welfare purposes within the meaning of Section 501(c)(4) of the Internal Revenue Code of 1986, as amended (the "Code"). In furtherance of the foregoing purposes, the Corporation shall:

1. Organize, finance and conduct the inaugural ceremonies of Richard Cordray as the Treasurer of the State of Ohio and activities and events associated with such inauguration;
2. Conduct the transition of Richard Cordray as the Treasurer of the State of Ohio by engaging in research and formulating policies related to such office and paying for all expenses associated with such activities; and
3. Engage in other lawful activities that directly or indirectly further the foregoing purposes.

**SIXTH.** The Board of Directors of the Corporation shall, for the purposes of any statutes or rule of law relating to corporations, be taken to be members of the Corporation, and they shall have all the rights and privileges of members.

**SEVENTH.** These Articles of Incorporation may be amended from time to time as provided for in the Corporation's Code of Regulations; provided that, the provisions of the Code of Regulations must be consistent with the provisions of these Articles of Incorporation.