



DATE: 08/05/2010	DOCUMENT ID 201021601870	DESCRIPTION DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	FILING 25.00	EXPED .00	PENALTY	CERT .00	COPY .00
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Receipt

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

WILLIAM MORROW
4356 STONER DR.
GROVE CITY, OH 43123

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner**372290**

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

GROVE CITY HIGH SCHOOL BAND BOOSTERS

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

Document(s)

DOMESTIC AGENT SUBSEQUENT APPOINTMENT

Document No(s):

201021601870

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 28th day of July, A.D.
2010.

Ohio Secretary of State



**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:

☐ Expedite PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
☒ Non Expedite PO Box 788
Columbus, OH 43216

STATUTORY AGENT UPDATE

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

(1) Subsequent Appointment of Agent ☒ Corp (165-AGS) ☐ LP (165-AGS) ☐ LLC (171-LSA)	(2) Change of Address of an Agent ☐ Corp (145-AGA) ☐ LP (145-AGA) ☐ LLC (144-LAD)	(3) Resignation of Agent ☐ Corp (155-AGR) ☐ LP (155-AGR) ☐ LLC (153-LAG) ☐ Partnership (155-AGR)
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Name of Entity GROVE CITY HIGH SCHOOL BAND BOOSTERS

Charter, License or Registration No. 372290

Name of Current Agent SCOTT W. BROWN

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

Name and Address of New Agent WILLIAM A. MORROW
Name of Agent

4356 STOVER DR
Mailing Address

GROVE CITY Ohio 43123
City State Zip Code

Complete the information in this section if box (1) is checked and business is an Ohio entity

ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT

The Undersigned, WILLIAM A. MORROW, named herein as the
Name of Agent

Statutory agent for, GROVE CITY HIGH SCHOOL BAND BOOSTERS hereby acknowledges
Name of Business Entity

and accepts the appointment of statutory agent for said entity.

Signature: William A. Morrow
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

Mailing Address

City Ohio
State Zip Code

☐ If the agent is an individual using a P.O. Box, check this box to confirm that the agent is an Ohio resident.

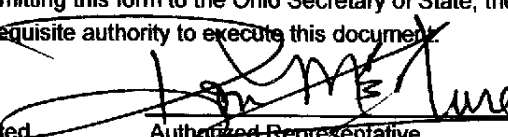
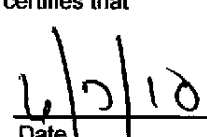
Complete the information in this section if box (3) is checked

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

City Ohio
State Zip Code

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)		
	Authorized Representative	Date
	<u>Ron McClure</u>	
	Print Name	
	_____ Authorized Representative	_____ Date
	_____ Print Name	