



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/10/2011	201106801193	TRADE NAME RENEWAL (RNR)	25.00	.00		.00	.00

Receipt

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

NATIONAL COURT REPORTERS, INC.
16600 W SPRAGUE STE 170
CLEVELAND, OH 44130-6318

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**1628613**

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

NETCOURTREPORTERS.COM, INC.

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

Document(s)

TRADE NAME RENEWAL

Document No(s):

201106801193

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 7th day of March, A.D.
2011.

Ohio Secretary of State



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

RENEWAL OF TRADE NAME REGISTRATION

1. The Registration Number to be renewed is: **1628613**
2. The trade name to be renewed is:
NETCOURTREPORTERS.COM, INC.
3. The date of original registration is: **June 8, 2006**
4. The applicant is: (check appropriate item)
 - ☒ an individual
 - ☒ an Ohio corporation, Charter Number: 1512278
 - ☐ 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: _____
 - ☐ a Professional association
 - ☐ an association
 - ☐ a Society, Foundation, Federation or other organization

5. The name of the applicant designated in item 4 is:

Joseph H. Koroch National Court Reporters, Inc.
 (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:

16600 SPRAGUE ROAD cleve OH 44130
 (Street address only, P.O. Box not acceptable)

CUYAHOGA, _____, _____
 (City, Village or Township) (County) (State) (Zip Code)

7. Complete only if applicant is a partnership:

Names of All General Partners

Complete Residence Address

_____	_____
_____	_____
_____	_____

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

By: _____

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