



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/21/2011	201126300651	CERTIFICATE OF CONTINUED EXISTENCE (CCE)	25.00	.00		.00	.00

Receipt

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

FIRESTONE MEMORIAL POST 449
1090 KENMORE BLVD.
AKRON, OH 44314

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**168215**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
FIRESTONE MEMORIAL AMERICAN LEGION POST NO. 449, INC.

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

Document(s)
CERTIFICATE OF CONTINUED EXISTENCE

Document No(s):
201126300651



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 16th day of September,
A.D. 2011.

Ohio Secretary of State



Prescribed by:

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

www.sos.state.oh.us

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 788
 Columbus, OH 43216

CONTINUED EXISTENCE OF NONPROFIT CORPORATION

(For Nonprofit Domestic or Foreign)

Filing Fee \$25.00

RECEIVED

SEP 18 2011

SECRETARY OF STATE

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

(1) ☒ Statement of Continued Existence (163-CCE)

(2) ☐ Verification of Foreign Nonprofit (173-FCE)

The corporation is still actively engaged in exercising its corporate privileges in Ohio

DO HEREBY STATE THE FOLLOWING:

Complete ALL of the general information in this section for the box checked above.

Name of Entity Firestone Memorial American Legion Post 449 Inc.

Charter or License No.
of Entity

168215

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

Principal Location

Akron

(City)

Summit

(County)

Date of Incorporation

October 9, 1936

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

Date Qualified in Ohio

(Date)

Incorporated in the State of

Principal Location NOT
in Ohio

(Street)

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

(City)

(County)

(State)

(Zip Code)

Principal Location in Ohio

(Street)

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

(City)

(County)

Ohio
(State)

(Zip Code)

Complete the information in this section if box (2) is checked.			
Has your principal location or Business Address Changed Since Last Filing?		☐ Yes	☐ No
If yes, an amendment (form no. 565) must be filed with an additional fee of \$50.00			
Name and Address of Current Agent (if applicable)		(Name)	
		(Street) NOTE: P.O. Box Addresses are NOT acceptable.	
(City)	(County)	Ohio (State)	(Zip Code)

Complete the information in this section if box (1) is checked.			
Name and Address of Current Agent		Richard H. Brent (Name)	
(Agent must sign Acceptance of Appointment if there is a different agent on record)		1090 Kenmore Blvd. (Street) NOTE: P.O. Box Addresses are NOT acceptable.	
Akron (City)	Summit (County)	Ohio (State)	44314 (Zip Code)
ACCEPTANCE OF APPOINTMENT			
The Undersigned <u>Richard H. Brent</u> , named herein as			
the Statutory agent for, <u>Firestone Memorial American Legion Post 449 Inc.</u> , hereby acknowledges and accepts the appointment of statutory agent for said entity.			
Signature:		<u>Richard H. Brent</u> (Statutory Agent)	

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

Edwin L. Hetherington
Authorized Representative

9-14-11
Date