DOC ID ----> 201210900961

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/19/2012	201210900961	TRADE NAME RENEWAL (RNR)	25.00	.00		.00	.00

Receipt

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

CHELSEA HOUSE DESIGN SOURCE
PO BOX 2706
COLUMBUS, OH 43216

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jon Husted

1332568

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

CHELSEA HOUSE DESIGN SOURCE

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

Document(s)	Document No(s):
TRADE NAME RENEWAL	**201210900961**

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 April, A.D. 2012.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201210900961

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: **1332568**

2. The trade name to be renewed is:
CHELSEA HOUSE DESIGN SOURCE

RECEIVED
APR 16 2012
SECRETARY OF STATE

3. The date of original registration is: **July 31, 2002**

4. The applicant is: (check appropriate item)
   - ___ an individual
   - X an Ohio corporation, Charter Number: 806257
   - ___ 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:
STYLE-LINE, INCORPORATED
(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:
901 W. 3RD AVE
(Street address only, P.O. Box not acceptable)
COLUMBUS, FRANKLIN, OHIO, 43212.
(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: Alan Duran, controller