



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
05/01/2012	201212101204	CERTIFICATE OF CONTINUED EXISTENCE (CCE)	25.00	.00		.00	.00

Receipt

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

MORROW, GORDON & BYRD, LTD.
JAMES R. COOPER
33 W. MAIN ST, BOX 4190
NEWARK, OH 43058-4190

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**184217**

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

THE DENISON UNIVERSITY RESEARCH FOUNDATION

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

Document(s)

CERTIFICATE OF CONTINUED EXISTENCE

Document No(s):

201212101204

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 26th day of April, A.D.
2012.

Ohio Secretary of State



**Form 522 Prescribed by the:
Ohio Secretary of State**

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

www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 788
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Statement of Continued Existence

Filing Fee: \$25

CHECK ONLY ONE (1) Box

(1) ☒ Statement of Continued Existence (163-CCE)
(Domestic Nonprofit Corporation)

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

By submitting this form the corporation is verifying with the secretary of state's office that it is still actively engaged in exercising its corporate privileges

Name of Corporation The Denison University Research Foundation

Charter or License Number 184217

2012 APR 26 PM 3:00

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

Location of Principal Office Granville

City

Licking

County

Date of Incorporation June 20, 1942

Date

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

Date of Qualification in Ohio

Date

Jurisdiction of Formation

Jurisdiction

Location of Office NOT in Ohio

Mailing Address

City

State

Zip Code

Location of Office IN Ohio

Mailing Address

City

Ohio

State

Zip Code

All Corporations must complete this section**Current Statutory Agent's Name and Address**

James R. Cooper

Name of Agent

33 W. Main Street

Mailing Address

Newark

City

Ohio

State

43055

Zip Code

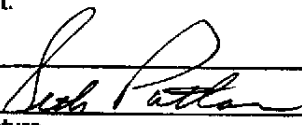
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

The statement must be signed by a director, officer, or three members in good standing.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box; an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.


Signature

Seth Patton, Treasurer

By (if applicable)

Seth Patton

Print Name

Signature

By (if applicable)

Print Name
Signature

By (if applicable)

Print Name