



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
06/13/2012	201216401244	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	100.00		.00	.00

Receipt

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

LEGALZOOM.COM, INC.
100 W BROADWAY, SUITE 100
PO BOX 29096
GLENDALE, CA 91209

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**2113632**

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

MIDWEST RESTORATION GROUP INC.

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

Document(s)

DOMESTIC ARTICLES/FOR PROFIT

Document No(s):

201216401244

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 12th day of June, A.D.
2012.

Ohio Secretary of State



Prescribed by:

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 870
 Columbus, OH 43216

INITIAL ARTICLES OF INCORPORATION

(For Domestic Profit or Nonprofit)

Filing Fee \$125.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) ☒ Articles of Incorporation Profit (113-ARF) ORC 1701	(2) ☐ Articles of Incorporation Nonprofit (114-ARN) ORC 1702	(3) ☐ Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1786
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Complete the general information in this section for the box checked above.

FIRST: Name of Corporation Midwest Restoration Group Inc.

SECOND: Location Akron Summit
 (City) (County)

Effective Date: (Optional) _____ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
 (mm/dd/yyyy)

☐ Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

The corporation is formed to engage in any lawful act or activity for which a corporation may be formed and all lawful acts and activities of the corporation are within the purposes of the corporation.

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any)

3	Common	\$0.01
(No. of Shares)	(Type)	(Par Value)

(Refer to instructions if needed)

2012 JUN 12 PM 2:45

Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as Initial Directors.

Brian Mrksich

(Name)

1245 S. Cleve-Mass., Suite 1

(Street)

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

Akron

(City)

Ohio

(State)

44321

(Zip Code)

(Name)

(Street)

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

(City)

(State)

(Zip Code)

(Name)

(Street)

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

(City)

(State)

(Zip Code)

REQUIRED

Must be authenticated
(signed) by an authorized
representative

(See instructions).

Authorized Representative

Sheila Dang

(print name)

6/4/2012

Date

Authorized Representative

(print name)

Date

Authorized Representative

(print name)

Date

Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Midwest Restoration Group Inc. hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

United States Corporation Agents, Inc.

(Name)

3250 West Market Street, Suite 205

(Street)

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

Fairlawn

Ohio

44333

(City)

(Zip Code)

Must be authenticated by an authorized representative



Authorized Representative Sheila Dang

6/4/2012

Date



Authorized Representative

Date



Authorized Representative

Date

ACCEPTANCE OF APPOINTMENT

The Undersigned,

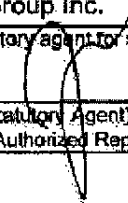
United States Corporation Agents, Inc.

, named herein as the

Statutory agent for,

Midwest Restoration Group Inc.

, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: 

(Statutory Agent)

Jacob Varghese, Authorized Representative, United States Corporation Agents, Inc.