



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
11/17/2015	201532003760	DISSOLUTION (DIS)	50.00	0.00	0.00	0.00	0.00

Receipt

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

THE MATTHEW KELLY FOUNDATION
BETH FORD
5081 OLYMPIC BLVD
ERLANGER, KY 41018

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

CN7710

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

THE MATTHEW KELLY FOUNDATION

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

Document(s)
DISSOLUTION

Document No(s):
201532003760

Effective Date: 11/16/2015



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
17th day of November, A.D. 2015.

Ohio Secretary of State



Form 560 Prescribed by:

JON HUSTED
 OHIO SECRETARY OF STATE

Toll Free: (877) SOS-FILE (877-767-3453)

Central Ohio: (614) 466-3910

www.OhioSecretaryofState.gov

busserv@OhioSecretaryofState.gov

File online or for more information: www.OHBusinessCentral.com

Mail this form to one of the following:

Regular Filing (non expedite)

P.O. Box 1329

Columbus, OH 43216

Expedite Filing (Two business day processing time.

Requires an additional \$100.00)

P.O. Box 1390

Columbus, OH 43210

Certificate of Dissolution

(Nonprofit, Domestic Corporation)

Filing Fee: \$50

(139-DISM (Members) & 175-DIST (Directors))

2015 NOV -5 PM 12:11

2015 NOV 16 PM 12:18

Complete the following information.

The corporation named below has adopted a resolution of dissolution.

 Name of Corporation

 Charter Number
Location of Principal Office in Ohio

City

County

State

Names and addresses of the directors.

Name

Address

Name

Address

Name

Address

Names and addresses of the officers.

Matthew Kelly

Name

5150 N. Ocean Dr., Singer Island FL 33404

Address

Fr. Ron Rieder

Name

860 Cherry St., Huntington, IN 46750

Address

Beth Ford

Name

5477 Andover Ct., Burlington, KY 41005

Address

Name and address of the Statutory Agent.

David D'Anniballe, CPA

Name

2720 Sunset Blvd

Address

Steubenville

City

OH

State

43952

Zip Code

Please complete this section if the corporation is appointing a new agent.

ACCEPTANCE OF APPOINTMENT

The Undersigned,

David D'Anniballe

Statutory Agent Name

, named herein as the

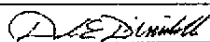
Statutory agent for,

The Matthew Kelly Foundation

Corporation Name

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

Statutory Agent Signature



Individual Agent's Signature/Signature on behalf of Business Serving as Agent

The date of dissolution if other than the filing date

10/1/2015

MM/DD/YYYY

Note: The date of dissolution must be on the date of filing, or a later date that is not more than 90 days after the date of filing, pursuant to Ohio Revised Code section 1702.47(H).

Check the appropriate box and provide information as required:

- ☒ The resolution of dissolution was adopted by the **Directors**. Pursuant to Ohio Revised Code section 1702.47(C), directors may adopt a resolution in the following cases, please check the box to state the proper statement of the basis for the adoption.

The resolution of dissolution was adopted:

- ☐ When the corporation has been adjudged bankrupt or has made a general assignment for the benefit of the creditors;
- ☐ By leave of the court, when a receiver has been appointed in a general creditor's suit or in any suit in which the affairs of the corporation are to be wound up;
- ☒ When substantially all of the assets have been sold at judicial sale or otherwise; or
- ☐ When the period of existence of the corporation specified in its articles has expired.

- ☐ The resolution of dissolution was adopted by the **Members** pursuant to Ohio Revised Code section 1702.47(D).

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

Must be signed by an authorized officer, unless the officer fails to execute and file the certificate within 30 days after the adoption of the resolution, or upon any date specified in the resolution as the date upon which the certificate is to be filed, or upon the expiration of any period specified in the resolution as the period within which the certificate is to be filed, whichever is latest, in which event the certificate of dissolution may be signed by any three voting members and shall set forth a statement that the persons signing the certificate are voting members and are filing the certificate because of the failure of the officers to do so.

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

By (If applicable)

Matthew Kelly

Print Name

Signature

By (If applicable)

Fr. Ron Rieder

Print Name

Signature

By (If applicable)

Beth Ford

Print Name

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities for a Nonprofit Corporation, (ORC section 1702.47(G)(3)).

THE MATTHEW KELLY FOUNDATION

Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate of Dissolution and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1702.55 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229	09/15/15	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319 Overnight: P.O. Box 182413 Columbus, OH 43218-2413	11/12/15 Regular: P.O. Box 182413 Columbus, OH 43218-2413

Note: This affidavit must be signed by a person executing the certificate of dissolution or by an officer of the corporation.

Signature

David E D'Anniballe

Title

CPA, STATUTORY AGENT

DAVID E D'ANNIBALLE CPA

Name

2720 SUNSET BLVD

Mailing Address

STEUBENVILLE

City

OH

State

43952

Zip Code

Sworn to and subscribed in my presence on 11/12/15

Date

Seal

Judith L Byers
Notary Public



Date

JUDITH L. BYERS
NOTARY PUBLIC, STATE OF OHIO
MY COMMISSION EXPIRES DECEMBER 6, 2016