



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/29/2015	201536301238	REINSTATEMENT (REN)	25.00	0.00	0.00	0.00	0.00

Receipt

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

FELIX GORA
600 VINE STREET
SUITE 2650
CINCINNATI, OH 45202

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
228295

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
ZION LUTHERAN CHURCH OF MT. WASHINGTON, CINCINNATI, OHIO

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

Document(s)
REINSTATEMENT

Document No(s):
201536301238

Effective Date: 12/24/2015



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
29th day of December, A.D. 2015.

Jon Husted
Ohio Secretary of State



Form 525B Prescribed by:

JON HUSTED
 OHIO SECRETARY OF STATE

 Toll Free: (877) SOS-FILE (877-767-3453)
 Central Ohio: (614) 486-3810

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 788
 Columbus, OH 43216

 Expedite Filing (Two business day processing time,
 Requires an additional \$100.00)

 P.O. Box 1390
 Columbus, OH 43216

Reinstatement

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

- (1) ☒ Reinstatement of a Nonprofit Corporation
 (for failure to file a statement of continued
 existence)
 (109-RENN)

- (2) ☐ Reinstatement of a Limited Liability Partnership
 (for failure to file biennial report(s))
 (112-PLR)

THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)

Cancellation Date

The entity was canceled on

- (3) ☐ Reinstatement of a Professional Corporation
☐ (for failure to file biennial report(s))
 (110-RENP)

THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)

Name of Entity

 ZION LUTHERAN CHURCH OF MT. WASHINGTON,
 Cincinnati, OH

Charter/Registration Number

228 295

2015 DEC 24 PM 2:37

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

Reinstatement must
 be signed by an authorized
 representative. (see instructions
 for specific information)

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 *July J*

By (if applicable)

 Print Name *FELIX J. GORA*

Signature

By (if applicable)

Print Name