DOC ID ----> 202428901708

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
10/15/2024	202428901708	REINSTATEMENT (REN)	25.00	0.00	0.00	0.00

Receipt

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

CINCINNATI TRADITION
ATTN: ANDREA MEYER
190 EWING DRIVE , APARTMENT A
FAIRFIELD, OH 45014

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Frank LaRose
676769

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

CINCINNATI TRADITION

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

Document(s)
REINSTATEMENT

Document No(s):
202428901708

Effective Date: 10/11/2024

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 15th day of October, A.D. 2024.

Ohio Secretary of State

DOC ID ----> 202428901708

Form 525B Prescribed by:

Frank LaRose
Ohio Secretary of State

Telephone: 877.767.3453
OhioSoS.gov | business@OhioSoS.gov
File online or for more information: OhioBusinessCentral.gov

RECEIVED
OCT 11 2024
OHIO SECRETARY OF STATE

Reinstatement

Filing Fee: $25
Form Must Be Typed

(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) **Cancellation Date** The entity was canceled on ____ THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)
(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)	**(4)** ☐ Reinstatement of a Tax Canceled Corporation (109-RENN) THIS FORM MUST BE ACCOMPANIED BY THE CERTIFICATE OF TAX CLEARANCE FROM THE OHIO DEPARTMENT OF TAXATION

Name of Entity CINCINNATI TRADITION

Charter/Registration Number 676769

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)

Andrea L. Meyer *Andrea L. Meyer*
Signature

By (if applicable)

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

ANDREA L. MEYER
Print Name

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)

Print Name