

OHIO SECRETARY OF STATE
PROCESSING STATEMENT
02/01/93

CHARTER NUMBER: FN060718
ROLL AND FRAME: H521-1752

CORPORATION:

THE SELLE FAMILY LIMITED PARTNERSHIP

H0521-1752

DOCUMENT NUMBER	CODE	FEE
93012701101	NFO	10.00

058711

RETURN TO: CALFEE, HALTER & GRISWOLD
ATTN C CREMEANS
88 E BROAD #1500
COLUMBUS OH 43215

0114



The State of Ohio

Bob Taft

H0521-1753

Secretary of State

FN 60718

Certificate

It is hereby certified that the Secretary of State of Ohio has custody of the Records of Incorporation and Miscellaneous Fillings; that said records show the filing and recording of: NFO

of:

THE SELLE FAMILY LIMITED PARTNERSHIP.

REGISTRANT: THE SELLE FAMILY LIMITED ETC.
ADDRESS: 7767 LITCHFIELD DR
MENTOR OH 44060

STATE OF INCORP: NA

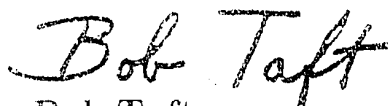
EXPIRATION DATE: 01/26/1998

United States of America
State of Ohio
Office of the Secretary of State

Recorded on Roll H521 at Frame 1754 of
the Records of Incorporation and Miscellaneous Fillings.

Witness my hand and the seal of the Secretary of State at
Columbus, Ohio, this 26TH day of JAN
A.D. 19 93




Bob Taft
Secretary of State



Prescribed by
 Bob Taft, Secretary of State
 30 East Grand St., 14th Floor
 Columbus, Ohio 43260-0418
 Form NFO (September 1988)

Approved 10Date 11-11-83

Fee \$10.00

REPORT OF USE OF FICTITIOUS NAME

1. The exact fictitious name being reported is: The Selle Family Limited Partnership

(SEE INSTRUCTION # 1 ON REVERSE)

2. The user of the above name is: (check appropriate box)

☐ an individual

☐ a General Partnership

☒ a Limited Partnership; County in Ohio

where certificate or application of

limited partnership is filed is Lake

☐ an Ohio corporation, charter no. _____

☐ a foreign corporation incorporated in

the state of _____

holding Ohio license no. _____

☐ an unincorporated association

(NOTE: Ohio has no provision for limited liability companies; if user is a limited liability company, please check this box.)

3. The name of the user designated in item 2 is: The Selle Family Limited Partnership

NOTE: Where the user is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed in Ohio under an assumed name, both the assumed name and actual corporate title of such foreign corporation must appear on this line.

4. The business address of the user is: 7767 Litchfield Drive

(street address)

Mentor

Lake

County,

Ohio

44060

(City, Village or Township)

(State)

(Zip Code)

NOTE: P.O. Box addresses are not acceptable.

5. Complete only if user is a partnership:

NAMES OF ALL GENERAL PARTNERS

Donald S. Selle

Joan M. Selle

COMPLETE RESIDENCE ADDRESSES

7767 Litchfield Dr., Mentor, OH 44060

7767 Litchfield Dr., Mentor, OH 44060

(NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and the actual corporate title of such general partner.)

6. The nature of business conducted by the user under the fictitious name is:

To acquire, operate, and develop real and personal property.

This document is signed by a corporate officer, general partner, or association member or officer, or the individual applicant.

By: Donald S. Selle

Title: General Partner

PLEASE RETURN THE ATTACHED DOCUMENTS TO:

CITIZEN ARCADE COMPANY
(Name of Firm or Company)

Box 1000
(Attention)

1000 Main St. H-521-1755
(Street Address)

CHICAGO, ILL.
(City, State and Zip code)

() - (Telephone Number)

How many documents are being filed? _____

Type of payment

_____ Check (please indicate check # _____)

_____ Cash (receipt # _____)

Amount of payment \$ _____

CORRESPONDENCE