



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
11/21/2025	202532500976	REINSTATEMENT (REN)	25.00	0.00	0.00	0.00

Receipt

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

OPERATOR TRAINING COMMITTEE OF OHIO, INC.
3972 INDIANOLA AVENUE
COLUMBUS, OH 43214

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose
333089**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
OPERATOR TRAINING COMMITTEE OF OHIO, INC.

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

Document(s)
REINSTATEMENT

Document No(s):
202532500976

Effective Date: **11/21/2025**



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
21st day of November, A.D. 2025.

Ohio Secretary of State

Form 525B Prescribed by:



Telephone: 877.767.3453

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Reinstatement

Filing Fee: \$25

Form Must Be Typed

(CHECK ONLY ONE (1) BOX)

<p>(1) Reinstatement of a Nonprofit Corporation <input checked="" type="checkbox"/> (for failure to file a statement of continued existence) (109-RENN)</p>	<p>(2) Reinstatement of a Limited Liability Partnership (for failure to file biennial report(s)) <input type="checkbox"/> (112-PLR)</p> <p>Cancellation Date The entity was canceled on <input type="text" value="MM/DD/YYYY"/></p> <p>THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)</p>
<p>(3) Reinstatement of a Professional Corporation <input type="checkbox"/> (for failure to file biennial report(s)) (110-RENP)</p> <p>THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)</p>	<p>(4) Reinstatement of a Tax Canceled <input type="checkbox"/> Corporation (109-RENN)</p> <p>THIS FORM MUST BE ACCOMPANIED BY THE CERTIFICATE OF TAX CLEARANCE FROM THE OHIO DEPARTMENT OF TAXATION</p>

Name of Entity

Charter/Registration Number

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

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name