



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/31/2013	201321200340	DOMESTIC ARTICLES/NON-PROFIT (ARN)	125.00	.00		.00	.00

**Receipt**

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

WOMEN'S CENTER FOR ECONOMIC OPPORTUNITY  
1638 MINTURN DR  
NEW ALBANY, OH 43054

# STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Jon Husted****2218394**

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

**WOMEN'S CENTER FOR ECONOMIC OPPORTUNITY**

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

Document(s)

**DOMESTIC ARTICLES/NON-PROFIT**

Document No(s):

**201321200340****Effective Date: 07/30/2013**

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 31st day of July, A.D.  
2013.

Ohio Secretary of State



Form 532B Prescribed by:

**JON HUSTED**  
**Ohio Secretary of State**

 Central Ohio: (614) 466-3910  
 Toll Free: (877) SOS-FILE (767-3453)  
[www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov)  
[Busserv@OhioSecretaryofState.gov](mailto:Busserv@OhioSecretaryofState.gov)

Mail this form to one of the following:

 Regular Filing (non expedite)  
 P.O. Box 670  
 Columbus, OH 43216

 Expedite Filing (Two-business day processing  
 time requires an additional \$100.00).  
 P.O. Box 1390  
 Columbus, OH 43216

## Initial Articles of Incorporation

### (Nonprofit, Domestic Corporation)

**Filing Fee: \$125**  
**(114-ARN)**

**First:** Name of Corporation 
**Second:** Location of Principal office  
 in Ohio

City

County

  
 State

**Effective Date**  
**(Optional)**
  
 mm/dd/yyyy

 (The legal existence of the corporation begins upon  
 the filing of the articles or on a later date specified  
 that is not more than ninety days after filing)

**Third:** Purpose for which corporation is formed

**\*\*Note for Nonprofit Corporations:** The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit corporation secures the proper state and federal tax exemptions. These agencies may require that a purpose clause be provided.

**\*\*Note:** ORC Chapter 1702 allows for additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.

**ORIGINAL APPOINTMENT OF STATUTORY AGENT**

The undersigned, being at least a majority of the incorporators of Women's Center for Economic Opportunity hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

Stewart A. Smith, CPA

Name

1638 Minturn Drive

Mailing Address

New Albany

City

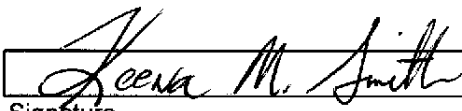
Ohio

State

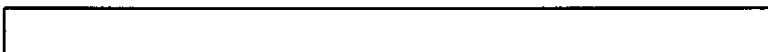
43054

Zip Code

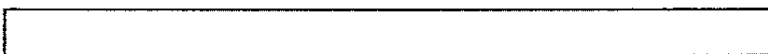
Must be signed by the  
Incorporators or a  
majority of the  
incorporators



Signature



Signature



Signature

**ACCEPTANCE OF APPOINTMENT**

The Undersigned, Stewart A. Smith, named herein as the  
Statutory Agent Name

Statutory agent for Women's Center for Economic Opportunity  
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 Corporate Agent

☐ If the agent is an individual and using a P.O. Box, check this box to confirm the agent is an Ohio resident.

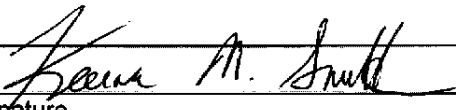
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

**Required**

Articles and original appointment of agent must be signed by the incorporator(s).

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.

  
Signature

By

KEENA M. SMITH  
Print Name

Signature

By

Print Name

Signature

By

Print Name