



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/21/2023	202305202608	NONPROFIT - CERTIFICATE OF CONTINUED EXISTENCE (CCE)	25.00				0

**Receipt**

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

**JUNIOR ACHIEVEMENT OF CENTRAL OHIO, INC.**  
**68 E. SECOND AVENUE**  
**COLUMBUS, OH, 43201**

# STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Frank LaRose**  
**219484**

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

**JUNIOR ACHIEVEMENT OF CENTRAL OHIO, INC.**

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

Document(s)

**NONPROFIT - CERTIFICATE OF CONTINUED EXISTENCE**

**Effective Date: 02/21/2023**

Document No(s):

**202305202608**



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 February, A.D. 2023.

**Ohio Secretary of State**

Form 522 Prescribed by:



Date Electronically Filed: 2/21/2023

Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

[OhioSoS.gov](http://OhioSoS.gov) | [business@OhioSoS.gov](mailto:business@OhioSoS.gov)File online or for more information: [OhioBusinessCentral.gov](http://OhioBusinessCentral.gov)**Statement of Continued Existence****Filing Fee: \$25****Form Must Be Typed****CHECK ONLY ONE (1) Box**(1) ☒ Statement of Continued Existence (163-CCE)  
(Domestic Nonprofit Corporation)(2) ☐ Verification of Foreign Nonprofit (173-FCE)  
(Foreign Nonprofit Corporation)**By submitting this form the corporation is verifying with the secretary of state's office that it is still actively engaged in exercising its corporate privileges**

Name of Corporation JUNIOR ACHIEVEMENT OF CENTRAL OHIO, INC.

Charter or License Number 219484

**Complete the information in this section if box (1) is checked**

Location of Principal Office COLUMBUS

City

FRANKLIN

County

Date of Incorporation 08/08/1950

Date

**Complete the information in this section if box (2) is checked**

Date of Qualification in Ohio

Date

Jurisdiction of Formation

Jurisdiction

Address of Principal Office

Mailing Address

City

State

Zip Code

**All Corporations must complete this section**

Current Statutory Agent's Name and Address

G, MICHAEL DAVIS

Name of Agent

68 E. SECOND AVENUE

Mailing Address

COLUMBUS

City

OH

State

43201

Zip Code

**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**

The statement must be signed by a director, officer, or three members in good standing.

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.

G MICHAEL DAVIS

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name