

Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free: (877) SOS-FILE (767-3453)

www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

Please return the approval certificate to:

Name:	(Individual or Business Name)
To the attention of:	(If necessary)
Address:	
City:	
State:	ZIP Code:
Phone Number:	E-mail Address:

Check here if you would like to receive important notices via e-mail from the Ohio Secretary of State's office regarding Business Services.

Check here if you would like to be signed up for our Filing Notification System for the business entity being created or updated by filing this form. This is a free service provided to notify you via e-mail when any document is filed on your business record.

Type of Service Being Requested: (PLEASE CHECK ONE BOX BELOW)

Preclearance Filing: A filing form, to be submitted at a later date for processing, may be submitted to be examined for the purpose of advising as to the acceptability of the proposed filing for a fee of \$50.00. The Preclearance will be complete within 1-2 business days.

Regular Service: Only the filing fee listed on page one of the form is required and the filing will be processed in approximately 3-7 business days. The processing time may vary based on the volume of filings received by our office.

Expedite Service 1: By including an Expedite fee of \$100.00, **in addition** to the regular filing fee on page \bigcirc one of the form, the filing will be processed within 2 business days after it is received by our office.

Expedite Service 2: By including an Expedite fee of \$200.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 1 business day after it is received by our office. This service is only available to walk-in customers who hand deliver the document to the Client Service Center.

Expedite Service 3: By including an Expedite fee of \$300.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 4 hours after it is received by our office, if received by 1:00 p.m. This service is only available to walk-in customers who hand deliver the document to the Client Service Center.



Form 532B Prescribed by the: Ohio Secretary of State

Central Ohio: (614) 466-3910 Toll Free: (877) SOS-FILE (767-3453)

www.OhioSecretaryofState.gov 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)

Second:	Location of Principal office in Ohio	Mailing Address] [] [
		City	State	Zip Code
		County		
Effective Date (Optional)	· · ·	legal existence of the corporation beg filing of the articles or on a later date s		
(Optional)	mm/dd/vvvv the	filing of the articles or on a later date s at is not more than ninety days after fili	pecified	
Optional)	mm/dd/yyyy the	filing of the articles or on a later date s at is not more than ninety days after fili	pecified	
	mm/dd/yyyy the	filing of the articles or on a later date s at is not more than ninety days after fili	pecified	

**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.

purpose clause be provided.

	ORIGINAL APPOINTMENT OF STATUTO	RY AGENT
	ing at least a majority of the incorporators of	
hereby appoint the fo	ollowing to be statutory agent upon whom any process, no upon the corporation may be served. The complete addre	
	apon the corporation may be served. The complete addition	
Name		
Mailing Address		
City	State	e Zip Code
-		
Must be signed by th	e	
Incorporators or a	Signature	
majority of the incorporators		
	Signature	
	Signature	
		NT
The Undersigned,		, named herein as the
	Statutory Agent Name	
Statutory agent for		
	Corporation Name	
hereby acknowledge	s and accepts the appointment of statutory agent for said	corporation.
Statutory Agent Sign	ature	
	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		
-		
Ву		
Print Name		
Signature		
Ву		
Бу		
Print Name		

Signature

Вy

Print Name

Instructions for Initial Articles of Incorporation (For Domestic Nonprofit Corporation)

This form should be used if you wish to file articles of incorporation for a domestic nonprofit corporation.

Name of Corporation

As set forth in Ohio Revised Code §1702.05, the name must be distinguishable on the records in the office of the secretary of state.

Ohio Principal Office Location

Please provide the address in Ohio where the principal office of the corporation is to be located.

Effective Date

An effective date may be provided but is not required. Pursuant to Ohio Revised Code §1702.04(D), the legal existence of the corporation begins upon the filing of the articles or on a later date specified in the articles. The effective date cannot (1) precede the date of filing with our office or (2) be more than ninety (90) days after the date of filing. If an effective date is given that precedes the date of filing, the effective date of the corporation will be the date of filing. If an effective date is given that exceeds the date of filing by more than ninety (90) days, our office will return the filing to you and request that a proper effective date be provided.

Purpose

Pursuant to Ohio Revised Code §1702.03, a nonprofit corporation must provide a purpose in the articles. A nonprofit corporation may be formed for any purpose or purposes for which natural persons lawfully may associate themselves. **Note:** 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.

Additional Provisions

If the information you wish to provide for the record does not fit on the form, please attach additional provisions on a single-sided, $8\frac{1}{2} \times 11$ sheet(s) of paper.

Original Appointment of Statutory Agent and Acceptance of Appointment

Pursuant to Ohio Revised Code §1702.06, an Ohio Corporation must appoint and maintain a statutory agent to accept service of process on behalf of the corporation. We cannot accept articles of incorporation unless the statutory agent information is provided. The statutory agent must be one of the following: (1) an Ohio resident; (2) an Ohio corporation; or (3) a foreign corporation that is licensed to do business in Ohio and is authorized by its articles of incorporation to act as a statutory agent and that has a business in Ohio.

If the statutory agent is an individual using P.O. Box address, they must also check the box below the address to state they are a resident of the state of Ohio. The statutory agent must also sign the Acceptance of Appointment at the bottom of page 2.

Signature(s)

After completing all information on the filing form, please make sure that page 3 is signed by the incorporator(s).

**Note: Our office cannot file or record a document which contains a social security number or tax identification number. Please do not enter a social security number or tax identification number, in any format, on this form.