



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/08/2017	201734102426	NONPROFIT - CERTIFICATE OF CONTINUED EXISTENCE (CCE)	25.00				0

**Receipt**

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

**LANGDON LAW LLC  
8913 CINCINNATI-DAYTON RD.  
WEST CHESTER, OH, 45069 3131**

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jon Husted**

**2002541**

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

**JOBS AND PROGRESS FUND, INC.**

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

Document(s)

**NONPROFIT - CERTIFICATE OF CONTINUED EXISTENCE**

**Effective Date: 12/08/2017**

Document No(s):

**201734102426**



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 8th day of December, A.D. 2017.

*Jon Husted*

**Ohio Secretary of State**

Form 522 Prescribed by:

**JON HUSTED**  
Ohio Secretary of State



Date Electronically Filed: 12/8/2017

Toll Free: (877) SOS-FILE (877-767-3453) | Central Ohio: (614) 466-3910  
www.OhioSecretaryofState.gov | busserv@OhioSecretaryofState.gov  
File online or for more information: www.OHBusinessCentral.com

For screen readers, follow instructions located at this path.

**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   
Charter or License Number

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

Location of Principal Office    
City County  
Date of Incorporation   
Date

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

Date of Qualification in Ohio   
Date  
Jurisdiction of Formation   
Jurisdiction  
Location of Office NOT in Ohio   
Mailing Address  
    
City State Zip Code  
Location of Office IN Ohio   
Mailing Address  
    
City State Zip Code

**All Corporations must complete this section**

Current Statutory Agent's Name and Address

DAVID R. LANGDON

Name of Agent

8913 CINCINNATI-DAYTON RD.

Mailing Address

WEST CHESTER

City

OH

State

45069

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.

MARK MILLER

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name