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NEW FILINGS Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	Gertificate of FICTITIOUS NAME FICTITIOUS NAME SEARCH
	EGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	CORP SEARCH
Ordered By:		
Date:		•

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Association on Higher Education and Disability, Inc. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or abbreviations of like import in language as will clearly indicate that it corporation instead of a natural person or partnership if not so contained i at present. "Company" or "Co." may not be used as a corporate suffix by a no corporation.)	or words; is a in the name
2. Ohio (State or country under the law of which it is incorporated) 3. 34-1265325 (FEI number, if applicable)	le)
4. 7/27/78 5. Perpetual (Date of Incorporation) (Duration: Year corp. will cease to exist o	r
6. Upon qualification (Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)	
7. 1540 W. 5th Avenue, Columbus, OH 43212	0
	SECR
(Current malling address)	` -<\-
8. The purpose of the corporation is to upgrade the quality of services and	<u> </u>
support available to persons with disabilities in higher education (Purpose(s) of corporation authorized in home state or country to be carried to the state of Florida)	s <u>≒</u> ∺
9. Name and street address of Florida registered agent:	
NationsCorp Registered Agents, Inc., 526 E. Park Ave. (Name)	
(Office address)	
Tallahassee , Florida, 32301 (Zip Code)	
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of p	rocess

for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's(signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and addresses of officers and/or Directors: (Street address only- P. O. Box NOT acceptable)

Chairman:	
7.1.1	
Vice Chairman:	
Address:	
Director:	
Address:	98 PYS
Director:	
Address:	TARY
B.OFFICERS (Street address only- P. O. See attached list President:	Box NOT acceptable) 9: PATE 25
Address:	0/
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

person signing application)



FACT SHEET

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UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, Bob Taft, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations and Miscellaneous filings; that said records show ASSOCIATION ON HIGHER EDUCATION AND DISABILITY, an Ohio Not-For-Profit Corporation, Charter No. 520372, having its principal location in Stow, County of Summit, was incorporated on July 27, 1978, is currently in GOOD STANDING upon the records of this office.

WITNESS my hand and official

seal at Columbus, Ohio this

11th day of March, A.D. 1998

Bob Taft Secretary of State