



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
09/08/2017	201725002270	REINSTATEMENT (REN)	25.00	0.00	0.00	0.00

Receipt

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

INSTITUTIONAL COMMUNITY DEVELOPMENT CORP.
ATTN: DARECE DANIELS
14010 GLENSIDE RD.
CLEVELAND, OH 44110

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Jon Husted
476273**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
INSTITUTIONAL COMMUNITY DEVELOPMENT CORPORATION

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

Document(s)
REINSTATEMENT

Document No(s):
201725002270

Effective Date: 09/07/2017



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 September, A.D. 2017.

Jon Husted
Ohio Secretary of State



Form 525B Prescribed by:

JON HUSTED
OHIO SECRETARY OF STATE

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

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 788
Columbus, OH 43216

Expedite Filing (Two business day processing time.
Requires an additional \$100.00)

P.O. Box 1390
Columbus, OH 43216

2017 SEP -7 PM 2:14

Reinstatement

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

<p>(1) <input checked="" type="checkbox"/> Reinstatement of a Nonprofit Corporation (for failure to file a statement of continued existence) (109-RENN)</p>	<p>(2) <input type="checkbox"/> Reinstatement of a Limited Liability Partnership (for failure to file biennial report(s)) (112-PLR) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND FILING FEE(S)</p> <p>Cancellation Date The entity was canceled on <input type="text"/></p>
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(3) Reinstatement of a Professional Corporation
(for failure to file biennial report(s))
(110-RENP)
THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT BIENNIAL REPORT(S) AND
FILING FEE(S))

Name of Entity

Charter/Registration Number

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
Reinstatement must be signed by an authorized representative. (see instructions for specific information)

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.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name