



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
08/20/2008	200823300606	DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	25.00	.00	.00	.00	.00

**Receipt**

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

EUROPEAN ADOPTION CONSULTANTS, INC.  
12608 ALAMEDA DR  
STRONGSVILLE, OH 44149

# STATE OF OHIO

## CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

**1061183**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for  
**PROJECT SUNSHINE, INC.**

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

Document(s)  
**DOMESTIC AGENT SUBSEQUENT APPOINTMENT**

Document No(s):  
**200823300606**



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 14th day of August, A.D.  
2008.

Ohio Secretary of State



www.sos.state.oh.us  
e-mail: busserv@sos.state.oh.us

Prescribed by:  
The Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

<b>Expedite this Form:</b> (Select One)	
<b>Mail Form to one of the Following:</b>	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input checked="" type="radio"/> No	PO Box 788 Columbus, OH 43216

### STATUTORY AGENT UPDATE

(For Domestic or Foreign, Profit or Nonprofit)  
Filing Fee \$25.00

RECEIVED

THE UNDERSIGNED DESIRING TO FILE A:

**(CHECK ONLY ONE (1) BOX)**

<b>(1) Subsequent Appointment of Agent</b> <input checked="" type="checkbox"/> Corp <input type="checkbox"/> LP (165-AGS) <input type="checkbox"/> LLC (171-LSA)	<b>(2) Change of Address of an Agent</b> <input type="checkbox"/> Corp <input type="checkbox"/> LP (145-AGA) <input type="checkbox"/> LLC (144-LAD)	<b>(3) Resignation of Agent</b> <input type="checkbox"/> Corp <input type="checkbox"/> LP (155-AGR) <input type="checkbox"/> LLC (153-LAG)
--	---	--

**Complete ALL of the general information in this section for the box checked above.**

Name of Entity Project Sunshine Incorporated

Charter or Registration No. 1061183

Name of Current Agent William H. Thesling

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

Name and Address of New Agent

Renee M. Cole  
(Name)

12823 Howe Road  
(Street)      **NOTE: P.O. Box Addresses are NOT acceptable.**

Strongsville      Cuyahoga      Ohio      44136  
(City)                      (County)                      (State)                      (Zip Code)

#### ACCEPTANCE OF APPOINTMENT

The Undersigned, Renee M Cole, named herein as the Statutory agent for, Project Sunshine Incorporated, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: Renee M Cole  
(Statutory Agent)

\* If the entity listed is an Ohio Domestic, the agent must sign the **Acceptance of Appointment**

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

Old Address of Agent

(Street) NOTE: P.O. Box Addresses are NOT acceptable.

(City) Ohio (State) (Zip Code)

New Address of Agent

(Street) NOTE: P.O. Box Addresses are NOT acceptable.

(City) Ohio (State) (Zip Code)

Complete the information in this section if box (3) is checked.

Is this agent resigning?

Yes  No

Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed

(Street) NOTE: P.O. Box Addresses are NOT acceptable.

(City) (State) (Zip Code)

REQUIRED  
Must be authenticated (signed) by an authorized representative  
(See Instructions)

*Margaret A Cole*  
Authorized Representative

8-8-08  
Date