



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/17/2010	201007600121	DOMESTIC ARTICLES/FOR PROFIT (ARF)	125.00	100.00	.00	.00	.00

**Receipt**

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

JIM GORDON  
21 EAST E. STATE ST.#1700  
COLUMBUS, OH 43215

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jennifer Brunner**

**1921826**

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

**SUSTAINABILITY FUNDING ALLIANCE OF OHIO, INC.**

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

Document(s)

**DOMESTIC ARTICLES/FOR PROFIT**

Document No(s):

**201007600121**



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 15th day of March, A.D.  
2010.

Ohio Secretary of State



Prescribed by:

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

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

<b>Expedite this Form:</b> (Select One)	
<b>Mail Form to one of the Following:</b>	
<input checked="" type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input type="radio"/> No	PO Box 670 Columbus, OH 43216

**INITIAL ARTICLES OF INCORPORATION**

(For Domestic Profit or Nonprofit)

Filing Fee \$125.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

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

(1) <input checked="" type="checkbox"/> Articles of Incorporation Profit (113-ARF) ORC 1701	(2) <input type="checkbox"/> Articles of Incorporation Nonprofit (114-ARN) ORC 1702	(3) <input type="checkbox"/> Articles of Incorporation Professional (170-ARP) Profession ORC 1785
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RECEIVED SECRETARY OF STATE  
 2010 MAR 15 PM 2: 34

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

FIRST: Name of Corporation Sustainability Funding Alliance of Ohio, Inc.

SECOND: Location Columbus Franklin  
(City) (County)

Effective Date (Optional) \_\_\_\_\_ Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.  
(mm/dd/yyyy)

Check here if additional provisions are attached

**Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.**

THIRD: Purpose for which corporation is formed

To receive and administer funds for cooperative purposes, to reduce the energy intensity of Ohio's economy, and for such other purposes as may be permitted by law.

**Complete the information in this section if box (1) or (3) is checked.**

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any) 100 Common No  
(No. of Shares) (Type) (Par Value)

(Refer to instructions if needed)

Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as initial Directors.

(Name)

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

(City) (State) (Zip Code)

(Name)

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

(City) (State) (Zip Code)

(Name)

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

(City) (State) (Zip Code)

REQUIRED

Must be authenticated (signed) by an authorized representative (See instructions)

[Signature]

Authorized Representative

James H. Gordon

(print name)

03/11/10

Date

[Signature]

Authorized Representative

(print name)

[Signature]

Date

[Signature]

Authorized Representative

(print name)

[Signature]

Date

*Complete the information in this section if box (1) (2) or (3) is checked.*

### ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Sustainability Funding Alliance of Ohio, Inc. hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

James H. Gordon

(Name)

21 E. State Street, Suite 1700

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

Columbus

(City)

, Ohio

43215

(Zip Code)

Must be authenticated by an authorized representative



Authorized Representative

03/11/2010

Date

 

Authorized Representative

 

Date

 

Authorized Representative

 

Date

#### ACCEPTANCE OF APPOINTMENT

The Undersigned,

James H. Gordon

, named herein as the

Statutory agent for,

Sustainability Funding Alliance of Ohio, Inc.

, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: 

(Statutory Agent)



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The Ohio Secretary of State  
Central Ohio: (614) 466-3910  
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www.sos.state.oh.us  
e-mail: busserv@sos.state.oh.us

### CONSENT FOR USE OF SIMILAR NAME

(For Domestic / Foreign, Profit or Nonprofit)  
Must Be Accompanied By Another Form

THE UNDERSIGNED DESIRING TO FILE A:

**(CHECK ONLY ONE (1) BOX) This filing does not extend the registration period**

<input checked="" type="checkbox"/> Where consenting entity is a corporation  (147-CSC)	Where consenting entity is a registrant of <input type="checkbox"/> Trade Name <input type="checkbox"/> Service Mark <input type="checkbox"/> Trade Mark (149-CSN)	Where consenting entity is a <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Partnership Having Limited Liability (148-CSL)
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Check here if additional provisions are attached

Charter or Registration No. of Entity Giving Consent 1902840

Name of Entity Giving Consent Sustainability Funding Alliance of Ohio, Inc. (Non-profit, dissolving)

Gives Its Consent To Sustainability Funding Alliance of Ohio, Inc.(For Profit)

To Use The Name Sustainability Funding Alliance of Ohio, Inc.

**REQUIRED**  
Must be authenticated (signed) by an authorized representative

Samuel C. Lanzetta  
Authorized Representative

03/11/2010  
Date

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Date

If the consenting party is a partnership, all general partners must sign. If only one partner is authorized to sign, a copy of the resolution authorizing the signature must be included.