



JON HUSTED
OHIO SECRETARY OF STATE

180 East Broad Street, Suite 103 (ground floor) • Columbus, Ohio 43215
Toll Free: (877) SOS-FILE (767-3453) Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov • busserv@OhioSecretaryofState.gov

Please return the approval certificate to:

Name:

lifesavers.edu
(Individual or Business Name)

[lifesavers.edu]

To the attention of:

(If necessary)

Address:

2628 South Green Road

City:

University Heights

State:

OH

ZIP Code: 44122-1536

Phone Number:

(855) ASK-QLAB

E-mail Address:

edu@lifesavers.io

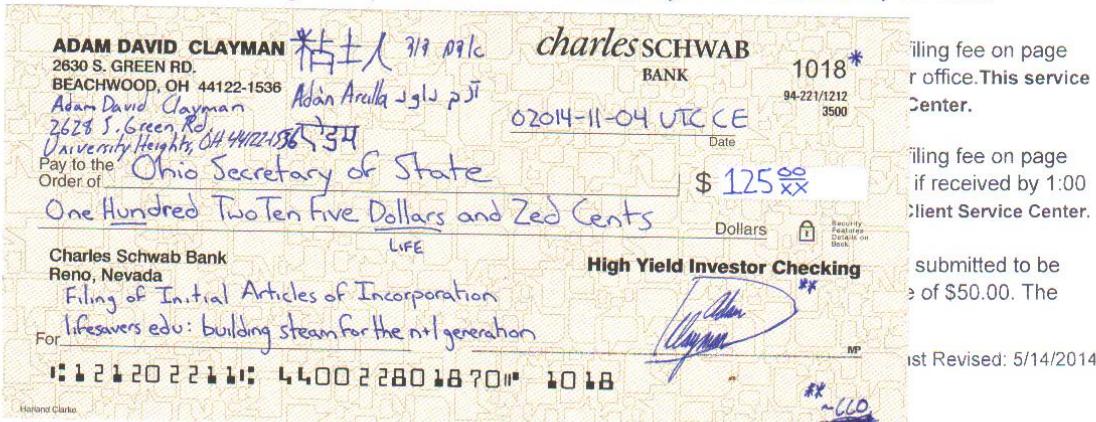
- Check here if you would like to receive important notices via e-mail from the Ohio Secretary of State's office regarding Business Services.
- Check here if you would like to be signed up for our Filing Notification System for the business entity being created or updated by filing this form. This is a free service provided to notify you via e-mail when any document is filed on your business record.

Please make checks or money orders payable to: "Ohio Secretary of State"

Type of Service Being Requested: (PLEASE CHECK ONE BOX BELOW)

Regular Service: Only the filing fee listed on page one of the form is required and the filing will be processed in approximately 3-7 business days. The processing time may vary based on the volume of filings received by our office.

Expedite Service 1: By including an Expedite fee of \$100.00, in addition to the regular filing fee on page one of the form, the filing will be processed within 2 business days after it is received by our office.





Form 532B Prescribed by:

JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 670
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Initial Articles of Incorporation
(Nonprofit, Domestic Corporation)
Filing Fee: \$125
(114-ARN)

First: Name of Corporation

Second: Location of Principal office
in Ohio

State

**Effective Date
(Optional)**
mm/dd/yyyy (The legal existence of the corporation begins upon
the filing of the articles or on a later date specified
that is not more than ninety days after filing)

Third: Purpose for which corporation is formed

"lifesavers.edu" is a student/teacher cross-cultural educational institution that is "scaling the Borlaug (B) scale". lifesavers absorb and apply STEAM subjects (science, technology, engineering, liberal arts, and mathematics) with utmost care for an ever-widening impact on the quantity and thick quality of life, targeting every member of the only race we are all a part of: the sapient one. Aiming for a century of high-capability life worldwide, we compete with Borlaug; our capacities are budding and are denominated in B. Learn more about the lifesavers.edu division at lifesavers.io. Take the initiative. Damn the politics, full STEAM ahead. [Creative Commons (CC0)]

****Note for Nonprofit Corporations:** The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit corporation secures the proper state and federal tax exemptions. These agencies may require that a purpose clause be provided.

****Note:** ORC Chapter 1702 allows for additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of lifesavers.edu

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

粘土人| Adàn Arcilla|Adam Clayman|ાડા માર્ક્યુન|એડમ|ાડમ

Name

2628 South Green Road

Mailing Address

University Heights

44122-1536

City

State

Zip Code

Must be signed by the
Incorporators or a
majority of the
incorporators



IAL

Signature

Signature

Signature

ACCEPTANCE OF APPOINTMENT

The Undersigned, named herein as the

Statutory Agent Name

Statutory agent for

lifesavers.edu

Corporation Name

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

Statutory Agent Signature



IAL

Individual Agent's Signature / Signature on behalf of Business Serving as Agent

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

Articles and original appointment of agent must be signed by the incorporator(s).



Signature
IAL

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.

By

粘土人| Adàn Arcilla|Adam Clayman|ஆଡାମ୍ ମାର୍କିଲାନ୍|اڈم کلے مان

Print Name

If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.

Signature

By

Print Name

Signature

By

Print Name