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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ascension Works, Inc. Name of Corporation - must in	clude suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporatio Affairs in Florida", "Certificate of Existence", or "Certificate of register the above referenced not for profit corporation to conduction to conduct the state of the corporation	Status" and check are submitted to
Please return all correspondence concerning this matter to the fo	ollowing:
Ascension Works, Inc.	
3208 Lake Jean Or. Address Orlando FL 32817 City/State and Zip Code	2015 DEC SECRET
City/State and Zip Code	S S J
E-mail address: (to be used for future annua	SSEE. FLORIE
For further information concerning this matter, please call:	
Brandon Raysuay at (407) Name of Person Area Code	724-1126 Daytime Telephone Number
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:	

□\$78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee, Certificate of Status &

Certified Copy

\$78.75 Filing Fee & Certificate of Status

☐ \$70.00 Filing Fee

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. A Scension Works Inc. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. California (State or country under the law of which it is incorporated) 3. 47-259 7326 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/17/14 5. perpetual (Date of Incorporation) (Date of duration, if other than perpetual)
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)
7. 3208 Lahe Tean Dr Orlando FL 32817 (Principal office address)
(Principal office address)
(Current mailing address, if different)
8. Charitable Purposes Youth Vevelopment + Academic Enrichted 501 3 (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
0 Name and street address of Clarida registered exerts (D.O. Day NOT executable) (Q.Y." 4
Name: Brandon T. Rausscan MBA Office Address: 3208 Lake Team Dr. Orlando (City) To Registered agent's acceptance:
Office Address: 3208 Lake Team Dr.
Oclando Florida 32817
(City) (Zip Code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process 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. 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

A. DIRECTORS

Chairman: Anthony Peters MBA		<u></u>
Address: 3208 Lake Tean Or		
Orlando FL 32817		
Vice Chairman: Sandra Glacia		., _
Address: 4994 Clave mont Ave		
Stockton GA 95207		
Director: Dr. Nolan CabrerA		
Address: PU Box 210069 Education #69		
Tusion AZ 85701		
Director: Brandon Rousscay		****
Address: 3208 Lah Tenn Or		
Orlando FL 32817		
B. OFFICERS		
President: Brandon T. Rousseau MBA	7. 2	
Address: 3208 Luhe Tean Dr.	ZOUS OF CASE O	
Orlando FL 32817	AHASA HASA	\$71.000mm
Vice President: Anthony Rulers	- 	Ш
Address 3200 Lake Jean Dr	25. <u>25.</u>	0
Orlando FL 32817	8 S	
Secretary: Sandra Graug		
Address: 4994 Clarement Dr Stockton GA 95207		
Treasurer: Anthony Peters		····
Address: 3208 Light Jean Dr. Orlando FL 32817		
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or director	rs.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the a	pplication)	
$\theta_{\rm cont}$ 1 1		
(Typed or printed name and capacity of person signing application)		

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ASCENSION WORKS

FILE NUMBER:

C3733303

FORMATION DATE:

12/17/2014

TYPE:

DOMESTIC NONPROFIT CORPORATION

JURISDICTION: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 18, 2015.

> ALEX PADILLA Secretary of State