

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 OCT 18 PM 5:21

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

100319921741

CR2EC81 (11/10)

**DOCUMENT #** F13000002080

1. Corporation Name

UNITED STATES SOCCER FEDERATION, INC.

2. Principal Office Address - No P.O. Box #

1801 S. PRAIRIE AVE

Suite, Apt. #, etc.

3. Mailing Office Address

1801 S. PRAIRIE AVE

Suite, Apt. #, etc.

City & State

CHICAGO, IL

City & State

CHICAGO, IL

Zip

60616

Country

U.S.

Zip

60616

Country

U.S.

4. Date Incorporated or Qualified  
To Do Business in Florida

05/13/2013

5. FEI Number

13-5591991

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, etc.

City

Plantation

State

FL

Zip Code

33324

**REINSTATEMENT**  
2017-2018

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of C T Corporation System

Registered Agent

*Ternell Kearney* Ternell Kearney, Assistant Sec.

Date 10/16/2018

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	CARLOS CORDEIRO	1801 S Prairie Ave,	Chicago, IL 60616
VP			
D	CHRIS AHRENS	1801 S Prairie Ave,	Chicago, IL 60616
D	VAL ACKERMAN	1801 S Prairie Ave,	Chicago, IL 60616
CEO	DAN FLYNN	1801 S Prairie Ave,	Chicago, IL 60616
CFO			OCT 18 2018

10. E-mail Address: ct-statecommunications@wolterskluwer.com

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

*Lydia Wahlke* Lydia Wahlke, Chief Legal Officer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

10/16/18

Daytime Phone

312.881.1300

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 10/18/2018  
Acc#120160000072

*W: C D W*

Name:	UNITED STATES SOCCER FEDERATION, INC.
Document #:	
Order #:	11212465

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 327.50

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DEPT. OF STATE  
18 OCT 18 PM 3:36

Thank you!