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13 JUL 22 PM 1:52
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: USA Rugby Charitable Foundation Corp.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Amanda Lubeck		
Name of Person		
USA Rugby Charitable Foundation		
Firm/Company		
2500 Arapahoe Avenue		
Suite 200		
Address		
Boulder, CO 80302		
City/State and Zip Code		
nwieder@usarugby.org		

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Lubeck

at (303) 539-0300 ext. 128
Area Code & Daytime Telephone Number

Name of Person Area C

MAILING ADDRESS:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$70.00 Filing Fee

□\$78.75 Filing Fee & Certificate of Status

□\$78.75 Filing Fee & Certified Copy

□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO 2 PM 1: 52

CONDUCT ITS AFFAIRS IN FLORIDA

SECRETARY OF STATE
FAILE AHASSEE 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:

USA Rugby Charitable Foundation	Corp.
(Name of corporation: must include the word "INCORPOR import in language as will clearly indicate that it is a corpor in the name at present, "Company" or "Co," may not be use	ATED* or *CORPORATION* or words or abbreviations of like ation instead of a natural person or partnership if not so contained as a corporate suffix by a nonprofit corporation.)
_{2.} Pennsylvania	_{3.} 85-0486679
(State or country under the law of which it is incorporate	d) (FEI number, if applicable)
4, 10/18/2002	5. Perpetual
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
_{6.} N/A	See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
(Date first conducted affairs in Florida if prior to registration.	See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
2500 Arapahoe Avenue, Suite 200,	, Boulder, CO 80302
	pal office address)
2500 Arapahoe Avenue, Suite 200,	Boulder, CO 80302
	ent mailing address)
Pursue donations through phone call	s, mail, email, events and personal visits
(Purpose(s) of corporation authorized in home state or cour	ntry to be carried out in the state of Florida)
	mo'n wom (III)
9. Name and atreet address of Florida registered agent:	(P.O. Box NO1 acceptable)
Name: NPAI Servius, lus	
_ ' ' ' ' ' '	101 .
Office Address: 1700 Sally Pily 15/av	IN KG
Die al mark	, Florida 33324
TIMMANTEN!	, Florida
(City)	(alp conc)
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 ointment as registered agent and agree to act in this capacity.
scaegrances an unia supplications a recepty secuple and appr	unionistis na rugnosti de legare nien legras su la literativa (ella literativa).

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. I 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.

By: Lamita Ganey Lanita Raney, Assistant Secretary (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

FILED

A. DIRECTORS

Chairman: Please see attached	13 JUL 22 PM 1:52
Address:	SEGRETARY OF STATE TALLAHASSEE FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Nikki Wiederaenders (Execut Address: 2500 Arapahoe Avenue, Su	ite 200, Boulder, CO 80302
Vice President: Address:	
Secretary: Chuck Sherwood	
Address: 2500 Arapahoe Avenue, Su	ite 200, Boulder, CO 80302
Treasurer: Chris Prentice	
Address: 2500 Arapahoe Avenue, Su	ite 200, Boulder, CO 80302
13. Signature of Chairman, Vice Chairman	to the application listing additional officers and/or directors. of or any officer listed in number 12 of the application)
14. Nikk Wiederaenders - E (Typed or printed name an	and capacity of person signing application)

Board of Directors: (Address: 2500 Arapahoe Avenue, Suite 200, Boulder, (O 803D2)

Steve Yeager - President

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Mike Puopolo – Vice President

SEGRETARY OF STATE TREESHASSEE FLORIDA

Chuck Sherwood - Secretary

Chris Prentice - Treasurer

Nick Bell

Pat Boggs

Mark Bryant

John Carr

Christ Geisert

Ernest Greene

Eric Hillman

Mark Lambourne

Joseph Olzacki

Howard Yeager

Nigel Melville - USAR Board Liaison

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 13 JUL 22 PM 1:53 JULY 12, 2013 JULY 12, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

USA RUGBY CHARITABLE FOUNDATION

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Care aile

Certification Number: 11201553-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp