

	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	·#)
PICK-UP		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
	Office Use Only	ý



02/13/2/-+01021-+027 ++78.75



 $\mathcal{J} \subseteq$

Ì.

RAGSDALE LIGGETTPLIC **LAWYERS**

Angela P. Wright | D 919.881.2213 | awright@rl-law.com

February 12, 2020

Via Federal Express

Florida Department of State **Registration Section** Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, Florida 32303

÷

Re: Champions In Motion, Inc.

Dear Sir/Madam:

ŧ.

Enclosed are two copies of the Application by Foreign Corporation for Authorization to Transact Business for Champions In Motion, Inc., along with a check in the amount of \$78,75 to cover the filing fee and to obtain a certified copy.

Upon processing our request, please return the processed document in the enclosed postage prepaid envelope.

If you have any questions, please do not hesitate to contact me directly at (919) 881-2213.

Sincerely yours,

RAGSDALE LIGGETT PLLC

Angela P. Wright NCCP

NCCP

Enclosures cc: Sandy Mitterling Schilder, Esq.

COVER LETTER

•

• •

TO: Registration Section Division of Corporations

.

..

.

.

SUBJECT: Champion	ns In Motion, Inc.			
	ime of corporation - m	ust include suffix		
Dear Sir or Madam:			1020 F	;
The enclosed "Application by Foreig "Certificate of Existence," or "Certifi above referenced foreign corporation	cate of Good Standing	g" and check are submi	Business in Florida	
Please return all correspondence cond	cerning this matter to t	he following:	PH 2]
	Sandy Mitterling S	childer	2: 2	
	Name of Pers	on	10 ²	
	Ragsdale Liggett			
	Firm/Compan	у		
	2840 Plaza Place,	Suite 400		
· · · · · · · · · · · · · · · · · · ·	Address			
	Raleigh, NC	27612		
	City/State and Z			
	Lisa@championsin	notion.com		
E-mail add		iture annual report not	fication)	
For further information concerning th	-			
Sandy Mitterling Schilder	at (_919)_	787-5200		
Name of Person	Area Code	Daytime Telephor	ne Number	
STREET/COURIER ADDR Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		MAILING ADD Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations	
Enclosed is a check for the following Please make check payable to: FLORIDA S70.00 Filing Fee S78.75 F Certifica	DEPARTMENT OF		\$87.50 Filing Fee, Certificate of Status & Certified Copy	

.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

 <u>Champions In Motion, Inc.</u> (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

	(If name unavail	lable in Florida, enter alternate corporate n	ame ado	opted for the purpose of transacting			-
2.	North Care	blina	3.	47-4402970	- C -	20 FU	· <u> </u>
	(State or count	ry under the law of which it is incorporated	±) (t	(FEI number, if appli	icable)	6	
4.	7/20/2015		5		554	Ω.	برسی .
	(Date	e of incorporation)		(Date of duration, if other that	in perpensal)	PH	
6.	Upon fi	ling	_		Εv	2	
	•			lorida, if prior to registration) I, F.S., to determine penalty liability)	DRIDA	26	
7	1310 SE Ma	ynard Road, Suite 204, Cary, NC 2	7511				
		(Principal	loffice	<u>street</u> address)			
-	. <u></u>	(Current m	ailing a	ddress, if different)			
8.	Name and stree	et address of Florida registered agent:	(P.O. E	Box <u>NOT</u> acc e ptable)			
	Name:	Paracorp, Incorporated					
Of	fice Address:	155 Office Plaza Drive, 1st Floor					
		Tallahassee		, Florida <u>32301</u>			
		(City)		(Zip code)			

9. 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. 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.

. Jody Moua, Assistant Secretary

(Registered agent's signature)

10. 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.

A. DIRECTORS

OChairman	Name: Rock Hood	Chairman	Name:	
□Vice Chairman	Address: 1310 SE Maynard Rd_Ste 204	□Vice Chairman	Address:	
Director	Cary, NC 27511	Director		
President				
Vice President		⊡Vice President		
Secretary	Treasurer	Secretary		
Other	Other	DOther		
Chairman	Name: Lisa Hood	Chairman	Name:	FEB I
Vice Chairman	Address: 1310 SE Maynard Rd., Ste 204	□Vice Chairman		
Director	Сагу, NC 27511	Director		ELFLOR
		C) President		RIDA 10
Vice President		OVice President		
Secretary	Treasurer	Secretary		
Other		00ber		00thar
Chairman	Name:	Chairman	Namo:	
⊖Vice Chairman	Address:	Uvice Chairman	Address:	<u></u>
Director		Director		
President		President		· • · · · · · · · · · · · · · · · · · ·
Ovice President	,,, _,	□Vice President	<u></u>	
Secretary		Secretary		
🛾 Other	Other	00ther		30ther

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals gay be added to the index when filing your Florida Department of State Annual Report form.

12h 12. \mathcal{D}

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.155, F.S.

12	L	lsa	Hood,	V	ice	Pres	iden	t	
							· · · · · ·	+-	 • •

t

DYD

(Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

CHAMPIONS IN MOTION, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 20th day of July, 2015, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for Ti failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 5th day of February, 2020.

Elaire I. Marshall

Socratory of State