(Requ	uestor's Name)			
(Addr	ess)			
(Addr	ess)			
(City/:	State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Busi	ness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





300420299563

12/14/23--01024--08! \*\*70.00



### **COVER LETTER**

Divis	stration Section ion of Corpora	tions			
SUBJECT:	Ignite Cheerle	ading, Inc.			
JOBSECT.		Name of corporation	n - mus	st include suffix	
Dear Sir or M	ladam:				
"Certificate o	f Existence," o	oy Foreign Corporation for "Certificate of Good Starporation to transact busing	inding"	and check are sub	
Please return	all correspond	ence concerning this matt	er to the	e following:	
Kelly E. Stewa	art				
		Name o	f Persoi	n	
Ignite Cheerle	ading, Inc.				
		Firm/Co	mpany		
25702 Risen S	Star Drive				
	<del></del>	Ado	lress		
Wesley Chape	el, FL 33544				
		City/State	and Zip	code	
kelbel.stewart	• •				
	E	-mail address: (to be used	for fut	ure annual report r	notification)
For further in	formation con	cerning this matter, please	call:		
Kelly Stewart		at ( <u>815</u> Area Co	95	55-9811	
Nam	e of Person	Area Co	de	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	heck payable to:	following amount: FLORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status	□ \$78.	TATE .75 Filing Fee & tified Copy	S87.50 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.

l Ignit	te Cheerlead	ing. Inc.					
		orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "C(	OMPANY," "CORPORATIO	N."		
(lf na	me unavaila	ble in Florida, enter alternate corporate name	adopt	red for the purpose of transact	ing business	in Flo	rida)
2. Illinois3.		80-0370970					
(Sta	(State or country under the law of which it is incorporated) (FEI number, if applicable)		ipplicable)				
4. 08/2	2/2013	of incorporation) 5.					
	(Date	of incorporation)		(Date of duration, if othe	r than perpe	tual)	
6							
		(Date first transacted business) (SEE SECTIONS 607.1501 & 607.1			ility)		
25702	2 Risen Star	Drive, Wesley Chapel, FL 33544					
/	<u> </u>	(Principal of	fice <u>st</u>	reet address)		· ·	
8. Nam	ne and stree	(Current maili t address of Florida registered agent: (P. Kelly Stewart		dress, if different)  x NOT acceptable)	SECRETARY	2023 DEC 14	PETALLE TO A SECOND TO A SECON
	Name:	Keny Siewait		-	14 3	PH	3 * 1
Office .	Address:	25702 Risen Star Drive		-		PH 4: I	المعادا
		Wesley Chapel		, Florida 33544	<u></u>	7	
		(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.

(Registered gent'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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS				
□Chairman Name: Kelly Stewart	Chairman	Name: Amy Klemme		
□Vice Chairman Address: 27502 Risen Star Drive	□ Vice Chairman	Address:		
□Director Wesley Chapel, FL 33544		Minooka, IL 60447		
■President	□ President			
Xivice President Elwina Stewart	□ Vice President			
Secretary Wesley Chubiticasurer FL 33	544 ■Secretary	□Treasurer		
□Other □Other		Other		
Description Name: Preedon Stews  Wice Chairman Address: 25702 Risen  Wesley Charles 3	S}c ~ □ Vice Chairman			
□President	President			
□Vice President	□Vice President			
☐ Secretary ☐ Treasurer	□ Secretary	□Treasurer		
□Other □Other	Other			
	□ Chairman	Name:		
Chairman Name:				
□Vice Chairman Address:		Address:		
□ Director	Director	,		
□ President	President			
□Vice President	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
□Secretary □Treasurer	☐ Secretary	□Treasurer		
□Other □Other	Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  12. 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 of the officer or director signing this document (and who is listed in number 11 above).				

she is aware that false information submitted in a document to the Department o s.817.155, F.S.

#### File Number

6902-359-2



## To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

## Department of Business Services. I certify that

IGNITE CHEERLEADING, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 22, 2013, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this day of NOVEMBER A.D. 2023

Authentication #: 2331902820 verifiable until 11/15/2024

Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE