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TRANSMITTAL LETTER

FILED
00 APR 10 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: AMERICAN INSTITUTE OF MARTIAL ARTS FAMILY KARATE CENTER INC.
(Proposed corporate name - must include suffix)

100003201901--9
-04/10/00--01127--018
*****78.75 *****78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ $70.00 Filing Fee	☒ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MIKE A. ALBELDE
Name (Printed or typed)

6841 STATE ROAD 54
Address

NEW PORT RICHEY FL. 34653
City, State & Zip

727-843-0568
Daytime Telephone number

APR 17 2000

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I *NAME*

The name of the corporation shall be:

AMERICAN INSTITUTE of MARTIAL ARTS FAMILY KARATE CENTER INC.

ARTICLE II *PRINCIPAL OFFICE*

The principal place of business/mailing address is:

6841 STATE ROAD 54, NEW PORT RICHEY, FL. 34653

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ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

MARTIAL ARTS / FITNESS INSTRUCTION

ARTICLE IV *SHARES*

The number of shares of stock is: 100 SHARES

ARTICLE V *INITIAL OFFICERS/DIRECTORS*

The name(s) and address(es):

MIKE ALBENZE 7116 STONE RD. PORT RICHEY FL 34668 (PRESIDENT)

TRISI ALBENZE 7116 STONE RD. PORT RICHEY FL. 34668 (EXECUTIVE SECRETARY)

ARTICLE VI *REGISTERED AGENT*

The **name and Florida street address** registered agent are:

MIKE ALBENZE (PRESIDENT) 7116 STONE RD. PORT RICHEY, FL. 34668

ARTICLE VII *INCORPORATOR*

The **name and address** of the Incorporator are:

MIKE ALBENZE (PRESIDENT) 7116 STONE RD. PORT RICHEY FL. 34668

****

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent — Date: 3-1-00

Signature/Incorporator — Date: 3-1-00