Entity Name: THE AMERICAN KUMIHIMO SOCIETY, INC.		Secretary of State		
•	ncipal Place of Business:		117073	1053CC
621 34TH AVE	•			
ST PETERSBU				
_				
Current Mai	ling Address:			
621 34TH A				
STPETERS	BURG, FL 33704 US			
FEI Number	: 81-1111581		Certificate of Status Des	sired: Yes
Name and A	Address of Current Registered Agent:			
GASKELL, ADF 621 34TH AVE				
	RG, FL 33704 US			
ST PETERSBU		registered office or regis	tered agent, or both, in the State of F	ilorida.
ST PETERSBU	RG, FL 33704 US	registered office or regis	tered agent, or both, in the State of F	lorida. 02/16/2021
ST PETERSBU	RG, FL 33704 US	registered office or regis	tered agent, or both, in the State of F	
ST PETERSBU	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E: ADRIENNE GASKELL Electronic Signature of Registered Agent	registered office or regis	tered agent, or both, in the State of F	02/16/2021
ST PETERSBU The above named SIGNATURE	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E: ADRIENNE GASKELL Electronic Signature of Registered Agent	registered office or regis	tered agent, or both, in the State of F	02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E: ADRIENNE GASKELL Electronic Signature of Registered Agent ctor Detail :			02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire Title	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E: ADRIENNE GASKELL Electronic Signature of Registered Agent Ctor Detail : P	Title	т	02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire Title Name	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E ADRIENNE GASKELL Electronic Signature of Registered Agent Ctor Detail : P GASKELL, ADRIENNE 621 34TH AVE N	Title Name Address	T HODNEFIELD, SHERRI J	02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire Title Name Address	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E ADRIENNE GASKELL Electronic Signature of Registered Agent Ctor Detail : P GASKELL, ADRIENNE 621 34TH AVE N	Title Name Address	T HODNEFIELD, SHERRI J 2045 HOFFMAN	02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip:	RG, FL 33704 US d entity submits this statement for the purpose of changing its i E ADRIENNE GASKELL Electronic Signature of Registered Agent Ctor Detail : P GASKELL, ADRIENNE 621 34TH AVE N ST PETERSBURG FL 33704	Title Name Address	T HODNEFIELD, SHERRI J 2045 HOFFMAN	02/16/2021
ST PETERSBU The above named SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	RG, FL 33704 US d entity submits this statement for the purpose of changing its in E: ADRIENNE GASKELL Electronic Signature of Registered Agent Ctor Detail : P GASKELL, ADRIENNE 621 34TH AVE N ST PETERSBURG FL 33704 S	Title Name Address	T HODNEFIELD, SHERRI J 2045 HOFFMAN	02/16/2021

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1600000382

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRI HODNEFIELD

TREASURER

02/16/2021

FILED Feb 16, 2021

Electronic Signature of Signing Officer/Director Detail