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 607, Florida Statutes; and that my name appears

above, or on an attachment with all other like empowered.

SIGNATURE: KELLY REGALADO

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P04000032337

Entity Name: UNITED MARTIAL ARTS ACADEMY, INC.

Current Principal Place of Business:

230 NORTH KROME AVENUE HOMESTEAD, FL 33030

Current Mailing Address:

230 NORTH KROME AVENUE HOMESTEAD. FL 33030 US

FEI Number: 51-0499795

Name and Address of Current Registered Agent:

REGALADO, ENRIQUE 230 NORTH KROME AVENUE HOMESTEAD, FL 33030 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title	VP
Name	REGALADO, ENRIQUE	Name	REGALADO, KELLY
Address	230 NORTH KROME AVENUE	Address	230 N. KROME AVENUE
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030

VP

Certificate of Status Desired: No

FILED Aug 30, 2015 Secretary of State CC5468028134

Date

08/30/2015 Date