

(Re	equestor's Name)	
(Address)		
(Áddress)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
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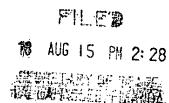
R. WHITE

AUG 15 FH 2:21

COVER LETTER

Division of Corporations	
SUBJECT: World Keimy	ung Taekwondo, Inc
DOCUMENT NUMBER: F1200000	
The enclosed Affidavit by Foreign Corporation submitted for filing.	to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence concerning this	s matter to the following:
WILL K. LEE Name of Contact Person	
World Keimyung Taeku Firm/Company	vondo, Inc
2495 Brunswick Pike Address	
Lawrence Ville NJ Of City/State and Zip Code	648
Taeboy 610 @ 9 mail. com E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter,	please call:
Name of Contact Person at	Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida	a Department of State for the following amount:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

	on the records of the Florida Department of State is:
World Keimyling Tae	ekwondo, Inc
2. This entity was authorized to transact business in I number is \[\begin{aligned} al	Florida on $\frac{1/3}{20/2}$ and its Florida document
3. This corporation was formed under the laws of	New Jersey
4. The name and address of each officer and/or direct	tor is as follows:
<u>Title:</u> <u>president</u>	Name and Address WILL K. LEE
•	2495 Brunswick Pike Lawrenceville, NJ, 08648
(Attach additional page	President
Signature of an officer or director	Title of person signing
WILL K. LEE	FILING FEE \$35
yped or printed name of person signing Make check Division of	s payable to Florida Department of State and Mail to: Corporations PO Box 6327 Tallahassee, FL 32314

CR2E127 (8/08)