

# FL6000003761

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

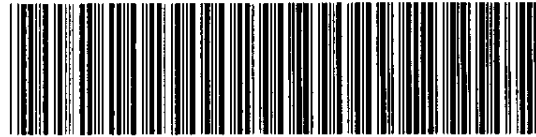
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Aikido Schools of Veshiba  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Richard W. Moore  
Name of Person

Richard W. Moore, P.A.  
Firm/Company

2011 Delta Blvd  
Address

Tallahassee, FL 32303  
City/State and Zip Code

richardm@moorecommgroup.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Richard Moore at ( 850 ) 224-0174  
Name of Person Area Code Daytime Telephone Number

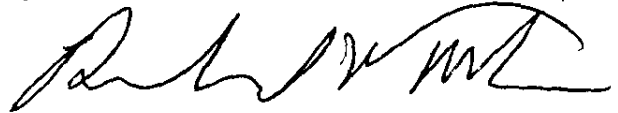
**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

I, Richard Moore, with permission  
from the owners of the for profit  
~~corporate~~ corporation Aikido Schools  
of Ueshiba, dissolved that corporation  
on August 18, 2016. I am releasing  
the name Aikido Schools of Ueshiba.



Richard W. Moore  
Attorney for Aikido Schools  
of Ueshiba

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Aikido Schools of Ueshiba, Incorporated  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Montana 3. 47-508 4679  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 22, 2015 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 6706 N. Nebraska Ave, #9746, Tampa FL, 33674  
(Principal office address)

(Current mailing address, if different)

8. Education in the martial art of Aikido  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Richard W. Moore

Office Address: 2011 Delta Blvd

Tallahassee, Florida 32303  
(City) (Zip Code)

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**10. 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 agent's signature)

11. 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.

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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**B. OFFICERS**

President: John Messoros

Address: 123 SW Lincoln Circle N  
St. Petersburg, FL 33703

Vice President: George Ledyard

Address: 12819 SE 38<sup>th</sup> Street, #267  
Bellevue, WA 98006

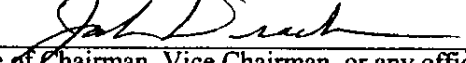
Secretary: Wendy White

Address: 2565 E. Offner Road, P.O. Box 1264

Treasurer: Beacher, IL 60401

Address: → Josh Drachman  
7949 NE 112<sup>th</sup> Street, Kirkland, WA 98034

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  Treasurer  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Josh Drachman, Treasurer  
(Typed or printed name and capacity of person signing application)

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# SECRETARY OF STATE STATE OF MONTANA

## CERTIFICATE OF EXISTENCE

I, Linda McCulloch, Secretary of State of the State of Montana, do hereby certify that

**AIKIDO SCHOOLS OF UESHIBA**

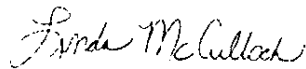
duly filed its Articles of Incorporation in this office on 22 September 2015, and on that date was created a body politic and corporate.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 18 August 2016 .



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8/18/2016

Business Entity Search - Montana Secretary of State



LINDA MCCULLOCH  
Secretary of State

Certified File Number: D266923

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