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(City/s	State/Zip/Phone	#)	
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(Document Number)			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 28, 2016

RITA J. YATES 3121 NE 26TH STREET OCALA, FL 34470

SUBJECT: AMERICAN ACADEMY OF PODIATRIC SPORTS MEDICINE

INCORPORATED

Ref. Number: W16000079146

We have received your document for AMERICAN ACADEMY OF PODIATRIC SPORTS MEDICINE, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tanisha L Washington Regulatory Specialist II

Letter Number: 816A00025225

See attacked

COVER LETTER

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

cademy of Podiatric Sports Medicine

TO: New Filing Section

Dear Sir or Madam:

Division of Corporations

register the above referenced not for profit corporation to conduct its affairs in Florida.				
Please return all correspondence concerning this matter to the following: Rita J. Yates, Executive Director Name of Person American Academy of Padiatric Sports Medicine Firm/Company				
312/NE 26th Street Address Ocala, FL 34470 City/State and Zip Code Ritayates 2001. Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Rita J. Yates at (352, 620-8562) Name of Person Area Code & Daytime Telephone Number				
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: New Filing 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 \$\Boxed{1.578.75}\$ Filing Fee & \$\Boxed{1.578.75}\$ Certificate of Status \$\Boxed{1.50}\$ Certificate of Status & Certified Copy				
68				

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. Amencan Academy of Podiatric Sports Medicine, Incorporated
(Name of corporation: must include the world "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.)
2. Maryland (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Ouration: Year corp. will cease to exist or "perpetual") (Duration: Year corp. will cease to exist or "perpetual")
6. Une 1/2016 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)
7. 3121 NE 26th Street, Ocala, FL 34470 (Principal office address)
3121 NE 26th Street, Ocala, FL 34470
(Current mailing address)
Education = 5
(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: Rita J. Yates
Office Address: 3121 NE 26th St
Ocala, (City), Florida 34470 (Zip Code)
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.
(ata Lates)
(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 - See a Hached

	•	
A.	DIRECTORS	

Chairman;	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	C14 C14
President:	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional add	onal officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number	YECTOY r 12 of the application)
14. Pita J. Yates, E	xecutive Director
(Typed or printed name and capacity of person signing ap	plication)

American Academy of Podiatric Sports Medicine Executive Board 2016

President Alex Kor, DPM 1635 North Water Street Suite 524 Milwaukee, WI 53202 (414) 955-7225

Vice-President Amol Saxena, DPM Palo Alto Foundation Medical Group Dept. of Sports Medicine 3rd Floor Clark Building 795 El Camino Real Palo Alto, CA 94301 Office: (650) 853-2943 Fax: (650) 853-6094

Secretary-Treasurer Maggie Fournier, DPM 1754 Snowflake Place Onalaska, WI 54650 (608) 797-6010

Director R. Clint Laird, DPM 18735 Murdock Circle, Suite B Port Charlotte, FL 33948 (941) 624-6300

Immediate Past President David Jenkins, DPM Midwestern University 19555 North 59th Avenue Glendale, AZ 85308 (623) 572-3457

Executive Director Rita J. Yates 3121 NE 26th Street Ocala, FL 34470 (352) 620-8562 (352) 620-8765 - fax

Initial File #: 810858 Entity Type: Non-Profit Corporation

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS CORPORATIONS DIVISION



CERTIFICATE

16 DEC 14 AM II: 34

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code (Title 29) have been complied with and accordingly, this *CERTIFICATE OF GOOD STANDING* is hereby issued to

AMERICAN ACADEMY OF PODIATRIC SPORTS MEDICINE INC.

WE FURTHER CERTIFY that the domestic filing entity is formed under the law of the District on 2/27/1981; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 12/12/2016 11:27 AM

Muriel Bowser Mayor Business and Professional Licensing Administration

PATRICIA E. GRAYS Superintendent of Corporations Corporations Division