N22000001951

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N:) INC		
DOCUMENT NUMBER: _	N22000001951		_	
The enclosed Articles of Am				
Please return all corresponde	nce concerning this matte	er to the following:		
Daniel Dease				
•		(Name of Contact P	erson)	
Kimusubi Aikido Inc				
	.	(Firm/ Compan	y)	
240 S Crystal Drive				
		(Address)	<u> </u>	
Sanford, Florida 32773				
		(City/ State and Zip	Code)	
info@kimusubiaikido.com				
Е	-mail address: (to be used	l for future annual re	port notification	n)
For further information conc	erning this matter, please	call:		
Daniel Dease		ai	321	303-7303
	(Name of Contact Person	<u> </u>	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status		Certif is Certif	0 Filing Fee Teate of Status Ted Copy Ttional Copy is Tosed)
<u>Mailing A</u> Amendme			reet Address mendment Sect	ion _

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KIMUSUBI AIKIDO INC (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) . Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: KIMUSUBI AIKIDO FOUNDATION INC name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida _ (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove		-	
2) Change Add		<u> </u>	
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change		- -	
Add Remove		- -	
6) Change Add		<u> </u>	
Remove		<u>-</u>	
E. If amending or addin (attach additional shee	g addition ts, if nece	onal Articles, enter change(s) here: ssary). (Be specific)	
			

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The date of each amendment(s) adoptidate this document was signed.	on:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
		1
Note: If the date inserted in this block d document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this nent of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	December 20, 2022
Signature	- Miller
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	DANIEL R DEASE II
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)