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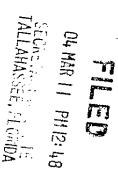
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TRANSMITTAL LETTER

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

SUBJECT: FLO	RIDA AIKIDO ASSOCIATIOI (PROPOSED CORPORA)		UDE SUFFIX)		**
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:		
S70.00 Filing Fee	□ \$78.75 Filing Fec & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	DR. JUSTIN NEWMAN	(Printed or typed)			·
	8241 S.W. 107TH AVE., STE C Address MIAMI, FL 33173-3730 City, State & Zip				
	305-898-6020 Daytime To	clephone number			ŧ

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: FLORIDA AIKIDO ASSOCIATION, INC.

FILED

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8241 S.W. 107TH AVE., STE C MIAMI, FL 33173-3730

SECRETARI OF STATE TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DEVELOP A NETWORK OF EDUCATORS WHICH PROVIDES THE COMMUNITY WITH REGULAR
HUMANITARIAN CONTRIBUTIONS, FURTHER DEVELOP THE INSTRUCTIONAL SEMINAR MARKET, AND
PROMOTE AN UNDERSTANDING OF AIKIDO, THE ART OF PEACE.

ARTICLE IV SHARES

The number of shares of stock is: 1000 COMMON SHARES @ \$0.01 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): DR. JUSTIN NEWMAN, PRESIDENT 8241 S.W. 107TH AVE., STE C MIAMI, FL 33173-3730

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

DR. JUSTIN NEWMAN 8241 S.W. 107TH AVE., STE C MIAMI, FL 33173-3730

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DR. JUSTIN NEWMAN 8241 S.W. 107TH AVE., STE C MIAMI, FL 33173-3730

*************************************	********
Having been named as registered agent to accept service of process for certificate, I am fayliflar with and accept the appointment as registered to	the above stated corporation at the place designated in the agent and agree to act in this capacity
\mathcal{M}_{Λ}	3/4/04
Signature Registered Agent	Date
77/1/2	3/4/04
Signature/Incorporator	Date