

P166000 20/58

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S. GILBERT

## COVER LETTER

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

**SUBJECT:** KOREAN TAEKWONDO MARTIAL ARTS KTMA INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** PETER MORA

Name (Printed or typed)

5271 SW 8 ST. APT 512

Address

MIAMI FL 33134

City, State & Zip

305-424-6969

Daytime Telephone number

AMERICAN222@AOL.COM

E-mail address: (to be used for future annual report notification)

**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: KOREAN TAEKWONDO MARTIAL ARTS KTMA INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2026 S.W. 1 ST #3, MIAMI FL. 33135

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ENTER INTO ANY AND ALL LAWFUL ACTIVITIES AND BUSINESS UNDER THE LAW OF THE UNITED STATE AND THE STATE OF FLORIDA.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CHO ME LEE PRESIDENT

Name and Title:

Address 388 BISCAYNE BLVD, #1400  
MIAMI FL. 33131

Address:

Name and Title: BRANDEN LEE P.V. & DIR.

Name and Title:

Address 2451 BRICKELL AVE. #1111  
MIAMI FL. 33130

Address:

Name and Title: PEDRO MORA SEC. AND DIR.

Name and Title:

Address 5271 SW 8 ST.  
MIAMI FL. 33134

Address:

FILED  
16 FEB 26 PM 1:  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: SHORT LEE \_\_\_\_\_

Address: 1111 BRICKELL #1212 \_\_\_\_\_

MIAMI FL. 33130 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: BOB COHEN ESQ. \_\_\_\_\_

Address: 1099 BRICKELL #2343 \_\_\_\_\_

MIAMI 33131 \_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 2-23-16 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

\_\_\_\_\_  
Required Signature/Registered Agent

2/23/16  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

\_\_\_\_\_  
Required Signature/Incorporator

2/23/16  
Date