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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D O'KEEFE
MAR 20 2018

COVER LETTER

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

SUBJECT: Korean Martial Arts Training Center 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Kenneth Martin
Name (Printed or typed)
4511 Parkwood Square
Address
Niceville FL 32578
City, State & Zip
850-240-2440
Daytime Telephone number
Masterm1@cox.net
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

Korean Martial Arts Training Center Inc.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4511 Parkwood Square

4511 Parkwood square

Niceville FL 32578

Niceville FL 32578

ARTICLE III PURPOSE

The propose of the corp is to teach and promote martial arts and

The purpose for which the corporation is organized is: _____
self defense training. Sell martial arts equipment and supplies needed to to participate in a course of instruction to the
to the general public.

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ARTICLE IV SHARES

10

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kenneth Martin President

Name and Title: Jane A. Martin Secretary

Address 4511 Parkwood Square

Address: 4511 Parkwood Square

Niceville FL 32578

Niceville FL 32578

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Kenneth Martin
Address: 4511 Parkwood Square
Niceville FL 32578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kenneth Martin
Address: 4511 Parkwood Square
Niceville FL 32578

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

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

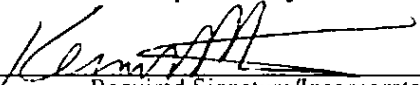
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7 MARCH 18
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

7 MARCH 18
Date