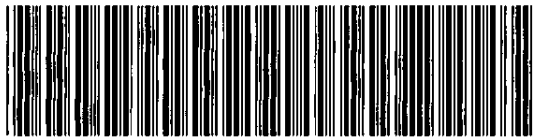


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

MRS
3/10

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: National Arbitration & Mediation, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

~~XXXXXXXX~~ Sharon Naro
(Name of Person)
National Arbitration & Mediation, Inc.
(Firm/Company)
990 Stewart Ave Suite 140
(Address)
GARDEN CITY NY 11530
(City/State and Zip code)

For further information concerning this matter, please call:

Pat Giuliani-Rhea at (904) 528 4189
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NATIONAL ARBITRATION & Mediation, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

NAM

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 56-2493345
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/13/2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NA
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 990 Stewart Avenue, Suite 140
(Principal office address)
Garden City NY 11530
(Current mailing address) - same

8. For conducting an arbitration/mediation business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

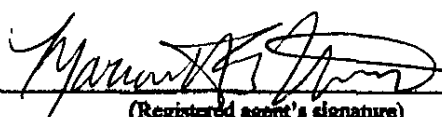
Name: Marion VITALE

Office Address: 502 S. Fremont Ave. # 435
Tampa FL, Florida 33606-4300
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.


(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 business addresses of officers and/or directors:

A. DIRECTORS

Director/Chairman: Roy Israel
Address: National Arbitration & Mediation, Inc.
990 Stewart Ave, Suite 140, GARDEN CITY, NY 11530

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

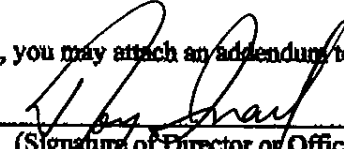
President: Roy Israel
Address: National Arbitration & Mediation, Inc.
990 Stewart Ave, Suite 140, GARDEN CITY, NY 11530

Vice President: see below
Address: _____

Secretary: Carla Israel
Address: National Arbitration & Mediation, Inc. 990 Stewart Ave Ste 140 GARDEN CITY, NY 11530

VP's
Treasurer: Patricia Giuliani-Rheacume
Address: 990 Stewart Ave, Suite 140, GARDEN CITY, NY 11530

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (N/A)

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Roy Israel
(Typed or printed name and capacity of person signing application)

State of New York
Department of State

} ss:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of NATIONAL ARBITRATION & MEDIATION, INC. was filed on 10/13/2004, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 13th day of February two
thousand and nine.*

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