

Division of Corporations

Page 1 of 2

(020000003688)**Florida Department of State**

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000037357 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES
Account Number : I19980000007
Phone : (407) 425-1020
Fax Number : (407) 839-3635

LIMITED LIABILITY COMPANY**Conflict Resolution Services for Divorcing Families, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 14 AM 10:24

FILED

MJH

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 14 PM 3:33

RECEIVED

Fax Audit Number H02000037357 9

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CONFLICT RESOLUTION SERVICES FOR DIVORCING FAMILIES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

1035 Silver Palm Lane
Maitland, FL 32751

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

KAREN BROUSSARD
1035 Silver Palm Lane
Maitland, Florida 32751

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Karen Broussard
Registered Agent's Signature

ARTICLE IV - Management:

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

FILED
02 FEB 14 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fax Audit Number H02000037357 9

Karen Broussard
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

KAREN BROUSSARD

Typed or printed name of signee
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (optional)
\$5.00 Certificate of Status (optional)

Prepared By:
Craig S. Pearlman
Killgore, Pearlman, Stamp, Ornstein & Squires
P.O. Box 1913, Orlando, Florida 32802-1913
(407) 425-1020
Florida Bar No 245501

Fax Audit Number H02000037357 9