

# L03000023837

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03 JUN 25 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LEFKOWITZ, BLOOM & SHAW, P.A.**

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\* BOARD CERTIFIED IN TAXATION AND  
MASTER OF LAWS IN ESTATE PLANNING  
+ ALSO ADMITTED IN MASSACHUSETTS

June 16, 2003

Attn: Corporations Division  
Secretary of State  
Bureau of Corporate Records  
Post Office Box 6327  
Tallahassee, Florida 32314

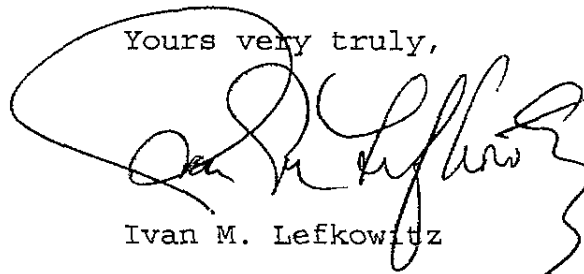
Re: Divorce By Mediation, L.L.C.  
Effective Date: Upon Filing

Dear Sir or Madam:

Enclosed are the original and a duplicate copy of the Articles of Organization of the above proposed company. The duplicate copy has been subscribed and acknowledged by the subscriber in the same manner as the original. Please endorse your approval of the Articles of Organization on the duplicate copy, and return the certified copy to this office.

A check is also enclosed in the total amount of \$125.00 to cover the \$100.00 filing fee, the \$25.00 fee for the certified copy of the Certificate of Organization, and the \$25.00 fee for designation of registered agent.

Yours very truly,



Ivan M. Lefkowitz

IML:mfj  
Enclosures  
cc: Mr. Meredith J. Cohen

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JUN 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Divorce by Mediation, L.L.C.

**ARTICLE II - Address:**

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

M/A Post Office Box 622346, Oviedo, Florida 32762  
418 Norwood Court, Oviedo, Florida 32765

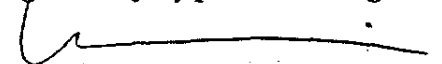
**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Meredith J. Cohen  
Name  
418 Norwood Court  
Florida street address (P.O. Box **NOT** acceptable)  
Oviedo, Florida 32765  
City, State, and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

 6/6/03  
Registered Agent's Signature


**ARTICLE IV - Management (Check box if applicable)**

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

**ARTICLE V - Effective Date**

The Limited Liability Company shall have an effective date of:

Date of Filing

 6/6/03  
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.)

Meredith J. Cohen  
Typed or printed name of signee