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**EXAMINER** 

# MUNSON VINING & MIDYETTE LLLP

ATTORNEYS AT LAW

Peter J. Munson C. Geoffrey Vining William M. Midyette, III 1611 Harden Boulevard Lakeland, Florida 33803 Office (863) 687-8320 Fax (863) 688-3699 | (863)683-2849 www.munsonviningmidyette.com

Of Counsel Joseph Anthony Geary

August 10, 2009

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Central Florida Mediation Group, L.L.C.

Dear Sir/Madam:

In connection with the above-referenced limited liability company, enclosed please find an original and one executed copy of Articles of Organization of Central Florida Mediation Group, L.L.C., along with a Certificate of Designation of Registered Agent/Registered Office. Please approve and file the originals and return a certified copy to our office.

Also enclosed is our firm's check for \$155.00, representing the following fees:

 Filing Fees
 \$100.00

 Certified Copy
 \$30.00

 Registered Agent Designation
 \$25.00

TOTAL \$155.00

Please call our office if anything further is required. Thank you for your services.

Sincerely,

MUNSON, VINING & MIDYETTE, LLLP

By:

William M. Midyette, III

Enclosures (as stated)

: Central Florida Mediation Group, L.L.C. (w/ enclosures)

WMM/dtl

#### ARTICLES OF ORGANIZATION

#### **OF**

### CENTRAL FLORIDA MEDIATION GROUP, L.L.C.

The undersigned, for the purpose of forming a limited liability company under the Florida Liability Act, F.S. Chapter 608, hereby make, acknowledge and file the following Articles of Organization.

#### **ARTICLE I - NAME**

The name of the limited liability company shall be Central Florida Mediation Group,

L.L.C.

#### **ARTICLE II – DURATION**

The limited liability company shall have perpetual duration.

## ARTICLE III - PRINCIPAL PLACE OF BUSINESS AND ADDRES

The principal place of business and the street address of the Company in Florida shall be 1611 Harden Boulevard, Lakeland, Florida 33803.

#### ARTICLE IV - PURPOSES AND POWERS

The general purpose for which the Company is organized is to engage in and to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

#### ARTICLE V - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is William M. Midyette, III, 1611 Harden Boulevard, Lakeland, Florida 33803.

#### ARTICLE VI - ADDITIONAL CAPITAL CONTRIBUTIONS

No additional contributions of cash or property are required to be made to the Company, except as the members may agree upon as provided in the Operating Agreement of the Company to be hereafter adopted by the Members of the Company (the "Operating Agreement").

#### ARTICLE VII - MANAGEMENT

The Company shall be managed by one or more managers and is, therefore, a manager-managed limited liability company. The signature of a Manager of the Company signing on behalf of the Company may be relied on as sufficient evidence of the action of the Company and that such action has been authorized by the unanimous consent of the Members as provided in the Operating Agreement. The name and address of each Manager is as follows:

Samuel G. Crosby

P. O. Box 8169, Lakeland, FL 33802-8169

William M. Midyette, III

1611 Harden Boulevard, Lakeland, FL 3380

Neal L. O'Toole

310 East Main Street, Bartow, FL 33831

#### ARTICLE VIII - OPERATING AGREEMENT

The Members of the Company shall hereafter adopt the Operating Agreement setting forth all the terms, provisions, conditions and covenants by which the Company will be governed. The power to adopt, alter, amend or repeal the Operating Agreement shall be vested in the Member(s) of the Company.

IN WITNESS WHEREOF, I have executed these Articles of Organization on this day of August, 2009.

WULL PA. MANGELYETTE, III

STATE OF FLORIDA, COUNTY OF POLK.

The foregoing instrument was acknowledged-before me\_this 10<sup>th</sup> day of August, 2009 by WILLIAM M. MIDYETTE, III, who is personally known to me or who has produced \_\_\_\_\_\_as identification.

Commission Expires:

(Type/Print/Stamp Name)

Serial Number, if any
NOTARIAL STAMP



## **ACCEPTANCE**

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 applications of my position as registered agent as provided in Chapter 608, Florida Statutes.

WILLIAM M. MIDYETTE, II

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered agent/registered office, in the State of Florida:

- (1) The name of the limited liability company is Central Florida Mediation Group, L.L.C.
- (2) The name and address of the registered agent and office is:

William M. Midyette, III Registered Agent

1611 Harden Boulevard, Lakeland, Florida 33803.

Having been named as Registered Agent and to accept service of process for the above-named 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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

WILLIAM M. MIDYETTÉ, III