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EXAMINER



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13 JAN -4 PM 1:38

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13 JAN -4 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: RICKY SOTO

DATE: 01/04/2013

REF. #: 000169.178860

CORP. NAME: BERMAN MEDIATION, L.L.C.

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TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 102867 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
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| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
BERMAN MEDIATION, L.L.C.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes for the purpose of forming a limited liability company, under the laws of the State of Florida, do hereby set forth the following:

**ARTICLE I
NAME**

The name of the limited liability company is: **BERMAN MEDIATION, L.L.C.**

**ARTICLE II
PERIOD OF DURATION**

The period of duration of the limited liability company shall be from the date of filing these Articles of Organization until the dissolution of the limited liability company pursuant to provisions of the Florida Limited Liability Company Act.

**ARTICLE III
PURPOSE**

The purpose for which the limited liability company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The limited liability company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

ARTICLE IV
ADDRESS OF PLACE OF BUSINESS

The mailing address and place of business in Florida, is 2823 Oakleigh Lane, Davie, FL 33328.

ARTICLE V
REGISTERED AGENT

The name and address of the initial registered agent in Florida of the limited liability company is Fred J. Berman, @ 2823 Oakleigh Lane, Davie, FL 33328.

ARTICLE VI
ADDITIONAL CONTRIBUTIONS

The total additional contributions, if any, agreed to be made by all members and the times at which, or the events happening of which, that shall be made are as follows: No total additional contributions have been agreed to at the date of filing these Articles of Organization. Additional contributions, if any, will be made upon unanimous agreement by all of the members of the limited liability company, and in accord with Chapter 608 Florida Statutes.

ARTICLE VII
MEMBERS

The initial members of the Organization are:

Fred J. Berman

Members may admit additional members upon unanimous agreement of the then existing members.

ARTICLE VIII
CONTINUITY OF BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company shall not be continued and the limited liability company shall be dissolved unless there is obtained the consent of all the remaining members of the limited liability company.

ARTICLE IX
MANAGEMENT

The limited liability company is to be managed by its managers. The name and address of the initial manager(s) of the limited liability company are as follows:

NAME:

FRED J. BERMAN

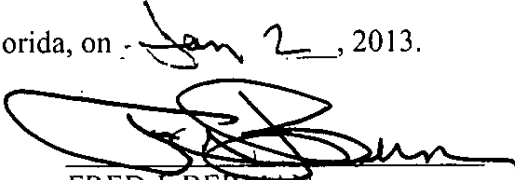
ADDRESS:

2823 Oakleigh Lane
Davie, FL 33328

The initial managers shall serve until their successor is elected and qualifies.

I AM HEREBY FAMILIAR WITH AND ACCEPT THE DUTIES
AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID
CORPORATION.

EXECUTED at Plantation, Florida, on Jan 2, 2013.


FRED J. BERMAN
Authorized Representative/
Registered Agent

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing Articles of Organization were acknowledged before me on
Jan 2, 2013, by FRED J. BERMAN, as Authorized Representative/Registered Agent
of BERMAN MEDIATION, L.L.C., a Limited Liability Company to be formed, who is
personally known to me ~~or who has produced~~ _____
_____ as identification and who did take an oath.

NOTARY PUBLIC:

Sign: JoAnn Gallo
Print: JoAnn Gallo
My Commission Expires:

NOTARY PUBLIC-STATE OF FLORIDA
JoAnn Gallo
Commission # EE021303
Expires: AUG. 26, 2014
BONDED THRU ATLANTIC BONDING CO., INC.