

PD1000096723
TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-10/03/01--01044--001
*****87.50 *****87.50

SUBJECT: Certified Mediation, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jeffrey J. Walker
Name (Printed or typed)

840 Northeast 20th Avenue
Address

Fort Lauderdale, FL 33304
City, State & Zip

(954) 763-8871
Daytime Telephone number

01 OCT -3 AM 11:35
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

Ps 10/4/01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Certified Mediation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

840 Northeast 20th Avenue
Fort Lauderdale, FL 33304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide mediation services to litigants in an effort to facilitate
a resolution of their claims.

ARTICLE IV SHARES

The number of shares of stock is:

100 (one hundred)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Jeffrey J. Walker, President
840 Northeast 20th Avenue
Fort Lauderdale, FL 33304

ARTICLE VI REGISTERED AGENT

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

Jeffrey J. Walker
840 Northeast 20th Avenue
Fort Lauderdale, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

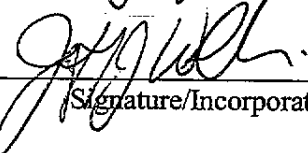
Jeffrey J. Walker
840 Northeast 20th Avenue
Fort Lauderdale, FL 33304

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent Jeffrey J. Walker

10-1-01
Date



Signature/Incorporator Jeffrey J. Walker

10-1-01
Date

FILED

01 OCT -3 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA