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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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· (Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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STANSIS MAY 30 2012

COVER LETTER

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

SUBJECT: Domestication of Virginia formed Corporation			
Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:			
FEES:			
Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75			
OPTIONAL:			
Certificate of Status \$ 8.75			
Name (printed or typed) 1361 13 th Ave S STE 215 Address STE 215 Address STE 215 AND STE			
jerrycroan@comcast.net E-mail address: (to be used for future annual report notification)			

CERTIFICATE OF DOMESTICATION

The undersigned,	Jerry E Croan ,	President ,
<i>5</i> ,	(Name)	(Title)
of	Commonwealth Mediation Services	a foreign corporation,
	(Corporation Name)	,,
n accordance with s.	607.1801, Florida Statutes, does hereby certify	·
1. The date on which	corporation was first formed was7	/10/1992,
-	here the above named corporation was first fo	
_		·
3. The name of the c	orporation immediately prior to the filing of th	is Certificate of Domestication
was Commonwe	alth Mediation Services, Inc.	·
4. The name of the c	orporation, as set forth in its articles of incorporation	oration, to be filed pursuant to
s. 607.0202 and 60	07.0401 with this certificate is Commonweal	th Mediation Services, Inc.
Jacksonville Bea 6. Attached are Flori to s. 607.1801.	the filing of the Certificate of Domestication ach, Fl da articles of incorporation to complete the do on , of Commonwealth Mediation Service	mestication requirements pursuant
/	sign this Certificate of Domestication on behal	If of the corporation and have done
so this the \(\frac{\beta}{2}\) day	of MRY	<u>, 20/2</u> .
-	(Authorized Signature) Filing Fee:	2012 MAY 29 AM SECOND TARRY OF S TALLAHAS SEE FILL \$ 50.00
	ertificate of Domestication rticles of Incorporation and Certified Copy	\$ 78.75
	otal to domesticate and file	\$ 50.00 \$\frac{1}{5}\$ \$1

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Commonwealth Mediation Services, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: 1361 13th Ave S Ste 215

Jacksonville Beach, FI 32250

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: All and any lawful purpose

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Jerry E Croan: President Judy W Croan:Vice President

ARTICLE VI INITIAL REGISTE	ED AGENT AND S'	TREET ADDRESS
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THE <u>NAME AND FLORIDA STREET ADDRESS</u> (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT Derry E Croan

3528 Bay Island Circle Jacksonville Beach, Fl 32250

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:
Judy W Croan
3528 Bay Island Circle
Jacksonville Beach, FI 32250

HAVING REEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE AROV

HAVING BEEN NAMED AS REGISTERED AGENT AND 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

Signature//Incorporator

1/15/12 Date 1/12

5/15/12 Date