

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000136825

**Entity Name:** ROBERSON MEDIATION & CONFLICT RESOLUTION SERVICES  
LLC

**FILED**  
**Mar 18, 2020**  
**Secretary of State**  
**9124436481CC**

**Current Principal Place of Business:**

500 EAST BROWARD BOULEVARD  
1710  
FT. LAUDERDALE, FL 33394

**Current Mailing Address:**

351 SW 29TH AVE  
FORT LAUDERDALE, FL 33312 US

**FEI Number: 81-3380626**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROBERSON CLARK, PAGE C  
351 SW 29TH AVE  
FT. LAUDERDALE, FL 33312 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name ROBERSON, CHARLIE SR  
Address 351 SW 29TH AVE  
City-State-Zip: FORT LAUDERDALE FL 33312

Title AMBR  
Name ROBERSON CLARK, PAGE C  
Address 351 SW 29TH AVE  
City-State-Zip: FORT. LAUDERDALE FL 33312

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PAGE ROBERSON CLARK**

**AMBR**

**03/18/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date