

LOG 000045715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

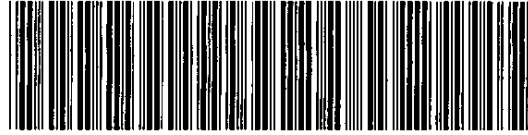
(Business Entity Name)

(Document Number)

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07/28/09--01019--003 **25.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUL 28 AM 11:32

T. HAMPTON
JUL 29 2009
EXAMINER



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Community Freedom Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Mendez
Name of Person
Community Freedom Services, LLC
Firm/Company
6236 KINGSPONTE PARKWAY SUITE #7
Address
ORLANDO, FL 32819
City/State and Zip Code
ktown4@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brett Norvig at (**352**) **871-1740**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

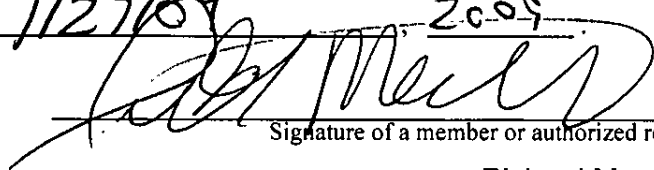
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

• MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sean Devries	6236 KINGSPONTE PARKWAY SUITE #7 ORLANDO, FL 32819	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Dated 7/27/09, 2009


Signature of a member or authorized representative of a member

Richard Mendez

Typed or printed name of signee