2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # M02000002530 04-23-2007 90362 014 ****50.00 1. Entity Name ARC FREEDOM, LLC Principal Place of Business Mailing Address 31 U U T T 111 WESTWOOD PLACE, STE. 200 111 WESTWOOD PLACE, STE. 200 BRENTWOOD, TN 37027 BRENTWOOD, IN 37027 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 330 North Wabash مانة, Apt. #, etc. Suite, Apt. #, etc. 01102007 Chq-LLC CR2E083 (12/06) <u>Suite 1400</u> 4. FEI Number City & State Applied For 62-1744230 Chicago, Not Applicable Zip itry. بدیار Zip Country \$5.00 Additional 5. Certificate of Status Desired 6(60611 USA 6. Name of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE ☐ Change ■ Addition SHERIFF, W.E. NAME NAME 111 WESTWOOD PLACE, STE, 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRENTWOOD, TN 37027 CITY-ST-ZIP MGR TITLE Delete TITLE MGR A Change ☐ Addition Mark J. Schulte KAESTNER, H. TODD NAME NAME STREET ADDRESS 111 WESTWOOD PLACE, STE. 200 STREET ADDRESS 330 North Wabash, #1400 CITY-ST-ZIP BRENTWOOD, TN 37027 CITY-ST-ZIP Chicago, IL 60611 TITLE X Delete MGR TITLE X Change ☐ Addition John P. Rijos HICKS, GEORGE T NAME NAME 330 North Wabash, #1400 STREET ADDRESS 111 WESTWOOD PLACE, STE. 200 STREET ADDRESS CITY-ST-ZIP BRENTWOOD, TN 37027 CITY-ST-7IP Chicago, IL 60611 TITLE ☐ Delete MGR TITLE ☐ Change Addition Mark W. Ohlendorf NAME NAME STREET ADDRESS STREET ADDRESS 6737 West Washington, #2300 CITY-ST-ZIP CITY-ST-ZIP Milwaukee, WI 53214 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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 of the ceever or purples empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

John P. Rijos, Co-President SIGNATURE: By SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP

04/10/07 312/977-3700

Daytime Phone #