

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Freedom Real Estate Services, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larry S. Kabinoff

Name of Person

Firm/Company

443 Bird Key Dr.

Address

Sarasota, FL 34236

City/State and Zip Code

Larry@greatfloridainvestments.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathryn Hopkinson at (**941**) **224-3660**

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2013

LSRRY S KABINOFF
443 BIRD KEY DR
SARASOTA, FL 34236

SUBJECT: FREEDOM REAL ESTATE SERVICES LLC
Ref. Number: L02000019660

We have received your document for FREEDOM REAL ESTATE SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 413A00023386

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Freedom Real Estate Services, LLC

2. (a) Principal office address of limited liability company: 443 Bird Key Dr.
Sarasota, FL 34236
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: P.O. Box 5206
Sarasota, FL 34277
(Note: MAY BE POST OFFICE BOX)

L02000019660

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Larry S. Kabinoff

Registered Office Address: 2206 Black Oak Ct
Sarasota, FL 34232

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

NEW Registered Office Address: 443 Bird Key Dr.
(MUST BE FLORIDA STREET ADDRESS) Sarasota
FL 34236

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Larry S. Kabinoff

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
13 OCT 21 AM 10:02
TALLAHASSEE, FLORIDA
SECRETARY OF STATE