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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: LET FREEDOM RING, LLC (Name of Limited Liability Company)	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jeffrey H. Garoden (Name of Person)	
LET FREEDOM RING, LLC (Firm/Company)	03 SI
6742 East Bay Blvd (Address)	ASSEE.
Navarre FL 32566 (City/State and Zip Code)	AM 8: 26 E.FLORIL.

For further information concerning this matter, please call:

Teffrey Groden at (850) 936 5220
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section

TO:

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Let Freedom Ring, UC	
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6742 East Bay Blvd Novarre, FL 32566	6742 East Bay Blod Navarre, FL 32566
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	1
Jeffrey H. Ga	roden SSE +
6742 East Bay Florida street address (P.O. Box NO	Stvd @ 0
Navarre FL City, State, and Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing M	Name and Address: Member		
MGRM	Jeffrey Caraden 6742 East Bay Blyd Navarre , FL 32566		
MGRM	Lenora Hebert 6742 East Bay Blud Navarre, FL 32566	* *	•
		e e j	254 P
		03 SEF	
(Use attachment if neces	sary)	HW 1-	
NOTE: An additional	article must be added if an effective date is requested.	ထ္	
REQUIRED SIGNATU	JRE:	26	
Signa	ture of a momber of an authorized representative of a member.	•	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jeffrey H. Groden
Typed by printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)