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SECRETARY OF STATE 28 OF JAN 20 PH 1:22





TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FREEDOM FINANCIAL Advisors, LLC (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:	
PHICCIP C. ELLIS (Name of Person)	. •
RETIREMENT & INVESTMENT STRATEGIES, INC. (Firm/Company)	
1370 SARNO ROAD	
MELBOURNE, FLORIDA 32935 (City/State and Zip Code) For further information concerning this matter, please call: OHILLIF C. ELLIS J. GREGG ELLIS at (321) 751-4115 (Name of Person) (Area Code & Daytime Telephone Number)	DIVISION OF CORPORA

STREET ADDRESS:

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

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:	
FREEDOM FINANGIAL ADVISORS, LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compa	ıny is:
Principal Office Address: Mailing Address:	
1370 SARNO ROAD 1370 SARNO ROAD	_
SUITE B SUITE B	
MELBOURNE, FLORIDA 32935 MELBOURNE, FLORIDA	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: PHILLIP C. ELLIS Name 1370 SAKNO ROAD, SUITE B Florida street address (P.O. Box NOT acceptable)	0,70
MELBOURNE, FLORIDA 32935 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

O. NY OY

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

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

Title:	Name and Address:	
"MGR" = Manager		- в
"MGRM" = Managing Member		. 146
AA C O AA		
MGRM_	J. GREGG ELLIS	45
	191 CANTERNBACK ISLAND DRIVE	
	SATELLITE BEACH, FLORIDA 32937	
MGRM	D	_
MONT	PHILLIP C. ELLIS	
	1223 BANANA RIVER DRIVE	•
	INDIAN HARBOR BEACH, FLORIDA 32937	
		
		* * <u></u> *
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		* ****
(Use attachment if necessary)		
ARTICLE Y- Effective DATE		NISION OF CO
ARTICLE VI ZITE ON	14 1004	
EFFECTIVE DATE TO BE JANUAR	c717,2001.	7 FF
NOTE: An additional article must	be added if an effective date is requested.	0 677
		구 경우이
REQUIRED SIGNATURE:		A Desi
/ M	e^{iN}	
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Signature of a member or a	authorized representative of a member.	🕶
(In accordance with section 6	508.408(3), Florida Statutes, the execution	
of this document constitutes	an affirmation under the penalties of perjury	
that the facts stated herein ar		
J. GREGG L	LLIS	_
Typed or	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)