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| Certified Copies        | _ Certificates of    | of Status |
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| Special Instructions to | Filing Officer:      |           |
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Office Use Only

G. MCLEOD

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**EXAMINER** 



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12/08/08--01030--010 \*\*25.00

08 DEC -8 PH 2: 58

## **COVER LETTER**

| TO: Registration Section Division of Corporation (Corporation) |                                    |   |   |
|--|------------------------------------|---|---|
| SUBJECT:   | Freedom Cap                        |   |   |
|  | (Name of Limited Li                | ability Company)  |   |
| -  |                                    |   |   |
| The enclosed Articles of Art                                   | nendment and fee(s) are submitted  | for filing.   |   |
| Please return all correspond                                   | ence concerning this matter to the | following:  |   |
|  | Lindsay T                          | Parrett Name of Person)   |   |
|  | 0                                  | Name of Person)   |   |
|  | Bridgewell                         | Capital LL  | -C  |
|  | O (                                | Firm/Company)   |   |
|  | 2550 Te                            | chnology Dr.,   | 202 G   |
|  |                                    |   |   |
|  | Orlando,                           | FL 32804  |   |
|  |                                    | State and Zip Code)   | ····  |
| For further information con-                                   | cerning this matter, please call:  |   |   |
| Lindsay P.   | wett                               | at (407) 447-50   | 100 ×102  |
| (Name of F   | 'erson)                            | (Area Code & Daytime Te   | lephone Number)   |
| Enclosed is a check for the                                    | following amount:                  |   |   |
| \$25.00 Filing Fee   | Certificate of Status              | 55.00 Filing Fee &<br>Certified Copy<br>(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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATION

08 DEC -8 PM 2: 58

| Freedom Capital  | LLC                                   |  |
|--|---------------------------------------|--|
| Name of the Limited Liability Company a (A Florida Limited Liabi   | s it now appears on dility Company)   | our records.)                            |
| The Articles of Organization for this Limited Liability Company we Florida document number <u>L08000047174</u> .             | re filed on $5/$                      | 12 2008 and assigned                     |
| This amendment is submitted to amend the following:  |                                       |  |
| A. If amending name, enter the new name of the limited liability   | company here:                         |  |
| Bridgewell Capital   | LLC                                   |  |
| The new name must be distinguishable and end with the words "Limited "L.L.C."  | Liability Company," t                 | he designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable:  |                                       |  |
| (Principal office address MUST BE A STREET ADDRESS)  |                                       |  |
| _  |                                       |  |
| Enter new mailing address, if applicable:  |                                       |  |
| (Mailing address MAY BE A POST OFFICE BOX)   | · · · · · · · · · · · · · · · · · · · |  |
| <u>-</u>   | * ****                                | <u> </u>                                 |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | address on our r                      | ecords, <u>enter the name of the new</u> |
| Name of New Registered Agent:  |                                       |  |
| New Registered Office Address:   | /D "                                  |  |
|  | (Enter F                              | lorida street address), Florida          |
|  |                                       |  |

New Registered Agent's Signature, if changing Registered Agent:

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.

(If Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

|       | Name                                    | <u>Address</u>                                       | Type of Actio   |
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Page 2 of 2

Filing Fee: \$25.00