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EXAMINER

, COVER LETTER

TO: Registration Section Division of Corporation	ons					
SUBJECT: Freedom Property Ventures, LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Organi	zation and fee(s) are subn	nitted for filing	g.			
Please return all correspondence	concerning this matter to	the following	; :			
Kelly J. Colen						
(Name of Person)						
Freedom Prope	erty Ventures, L	LC				
	(Firm	n/Company)				
37 Mayfair Lane						
	(.	Address)				
Boynton Beach, FL 33426						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Kelly J. Coleman	at (561	542-2462			
(Name of Persor	1)	(Area Code	e & Daytime Telephone Number)			
Enclosed is a check for the fo	llowing amount:		ECRETA HAS			
\$125.00 Filing Fee \$130 Cert	ificate of Status	6155.00 Filing Certified Cop (additional copy	g Fee & \$\sum \\$160.00 Fifting Feen on Status & \$\frac{1}{2}\$			
Regist Divisi P.O. E	ng Address tration Section ion of Corporations Box 6327 hassee, FL 32314	Registration Division of Clifton Bo 2661 Exec	ourier Address on Section of Corporations			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Freedom Property Ventures, LLC			
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
37 Mayfair Lane Boynton Beach, FL 33426	37 Mayfair Lane Boynton Beach, FL 33426		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another		
The name and the Florida street address of the re	egistered agent are:		
Kelly J. Coleman	— SA G		
37 Mayfair Lane	ress (P.O. Box NOT acceptable)		
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)		
Boynton Beach, 33	3 42 6		
City, State, a	nd Zip		
Having been named as registered agent and to a	accent 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 (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Kelly J. Coleman MGRM 37 Mayfair Lane Boynton Beach, FL 33426 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or 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.) Kelly J. Coleman Typed or printed name of signee Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation

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