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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Freedom Dept Solutions LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Articles of Correction and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Anthony Grassia Name of Person				
Freedom Dept Solutions LLC Firm/Company				
4304 9 Magnolia Cic				
CAR CAP				
Delray Beach IFL 33445 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Anthony Grassia at (561) 239-2608 Warme of Person at (561) Area Code & Daytime Telephone Number				
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 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:				
\$25 Filing Fee \$\bigcup \\$30 Filing Fee & \bigcup \\$55 Filing Fee & \bigcup \\$60 Filing Fee, \\ Certificate of Status & \\ Certified Copy & \\ Certified Copy \\ Certified Copy \\ \\ Certified Copy \				

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is: Freedom Dept Solutions L	ــــــــــــــــــــــــــــــــــــــ
SECO (CH	ND: The articles of organization or the application to transact business HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
P	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:	
	Freedom Dept Solutions (Incorrect Statement)	
	Dept is mispelled (reason) should be	
	Freedom Debt Solutions USA LLC (corrected Statement (Freedom Debt Solutions is already taken.)	sorf
	OR (Freedom Debt Solutions is already taken.)	
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	
	SF STATE FLORIDA	
Dated:	August 21st 2009	
	ante la	
	Signature of a member or authorized representative of a member	
	Anthony Grassia Typed or printed name of signee	
	Typed or printed name of signee	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

Electronic Articles of Organization For Florida Limited Liability Company

L09000074481 FILED 8:00 AM August 04, 2009 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is: FREEDOM DEPT SOLUTIONS LLC

Article II

The street address of the principal office of the Limited Liability Company is: 4304 SOUTH MAGNOLIA CIRCLE DELRAY BEACH, FL. US 33445

The mailing address of the Limited Liability Company is: 4304 SOUTH MAGNOLIA CIRCLE DELRAY BEACH, FL. US 33445

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

ANTHONY J GRASSIA 4304 SOUTH MAGNOLIA CIRCLE DELRAY BEACH, FL. 33445

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.

Registered Agent Signature: ANTHONY GRASSIA

Article V

The name and address of managing members/managers are:

Title: MGR ANTHONY J GRASSIA 4304 S MAGNOLIA CIRCLE DELRAY BEACH, FL. 33445 US

Signature of member or an authorized representative of a member Signature: ANTHONY GRASSIA

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