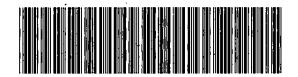
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T. CLINE

JAN 29 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: R	R Free LLC Name of Limited Liability Company	
The enclosed Articles of	Organization and fee(s) are submitted for filing.	
Please return all correspondent	ondence concerning this matter to the following:	
	Roxanne Free Name of Person	
	Creative Energies INC.	
1.	607 N Magnolia Ave	
	Ocaha FL 34475 ZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZZ	
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please call:	
Roxan	of Person at (352) 351-8889 Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount:	
	\$\ \text{Status} \ \ \text{Certificate of Status} \ \ \text{Certified Copy} \ \ \ \text{(additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
:	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is	:			
RR Free L (Must end with the words "Limited Liab	Lility Company," "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual or another			
The name and the Florida street address of the registered agent are: Creative Energies. Inc. Name				
Florida street address (P.C	agnolia Ave D. Bex NOT acceptable)			
Ocaha City, State,	FL 34475 and Zip			
Having been named as registered agent and to	accept service of process for the above stated limited			

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	Richard Free 4005 S Hwy 314-A Ocklawaha Fr 32179			
(Use attachment if necessary)	75 ZE			
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.) REQUIRED SIGNATURE:	e of filing: Decific and cannot be more than five business days prior			
Signature of a member of	r 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.) Roxanne Free 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)