

L11000019435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

(Business Entity Name)

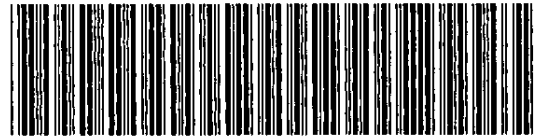
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J. SAULSBERRY  
EXAMINER

SEP 19 2013

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Freedom Franchise Systems, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph A. Bettley, CPA  
Name of Person

Freedom Franchise Systems, LLC  
Firm/Company

990 Laguna Dr.  
Address

Venice FL 34285  
City/State and Zip Code

jbettley@freedomboatclub.com  
E-mail address: (to be used for future annual report notification)

2013 SEP 18 AM 10:03

For further information concerning this matter, please call:

Joseph Bettley at ( 941 ) 451-8756 x 303  
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  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Freedom Franchise Systems, LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS) 990 Laguna Dr.  
Venice FL 34285

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX) 990 Laguna Dr.  
Venice FL 34285

2/14/2011  
3. Date of filing/registration in Florida

L11000019435  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Bettley, Joseph A, CPA

Registered Office Address: 1100 Tamiami Trails S  
Suite B  
Venice FL 34285

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Bettley, Joseph A, CPA

NEW Registered Office Address:  
(MUST BE FLORIDA STREET ADDRESS) 990 Laguna Dr  
Venice FL 34285

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Joseph A Bettley, CFO  
Printed or typed name of signee

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.

[Signature]  
Signature of Registered Agent

2013 SEP 18

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00