

#L1200011266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

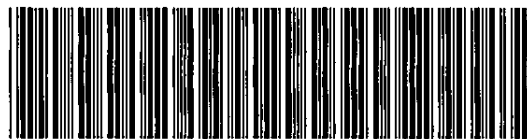
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/04/12--01019--010 **25.00

FILED
12 SEP - 4 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
SEP - 6 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: F.R.E.E. INTERACTIVE 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:

Michael Angelo

Name of Person

Online Filings Co.

Firm/Company

619 Cattlemen Rd. - Suite O11

Address

Sarasota, FL. 34232

City/State and Zip Code

state@onlinefilings.biz

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Angelo

Name of Person

at (850) 270-6379

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

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
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 within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FILED
12 SEP - 4 AM 11:03
STATE
TREASURY, FLORIDA

FIRST: The name of the limited liability company is:
F.R.E.E. INTERACTIVE LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Please add the following Manager / Member to the filing.

ERIC SCHOENBORN

928 PENNSYLVANIA - SUITE 1

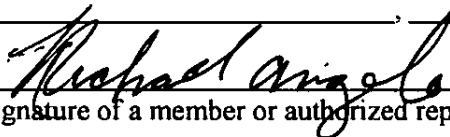
MIAMI BEACH, FL. 33139

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: _____



Signature of a member or authorized representative of a member

Michael Angelo

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)