113000098990

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



100249313531

07/11/13--01014--014 **125.00

2013 JUL 11 PH 12: 20
SECRE ARY OF STATE
AND ARY OF STATE
ORION

B. BOSTICK

JUL 12 2013

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: FIG

Freedom Home Watch, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

r lease return an corres	policine concerning this man	ici to the followin	ıg.				
Harold	N. Britt		•				
		Name of Person					
Freedo	m Home Wate	ch, LLC					
		Firm/Company					
1609 7	th Street W						
		Address					
Palmet	to, FL 34221						
- 		ty/State and Zip Co	de				
hpartner@	②tampabay.rr.com	l .			70	2	
For further information Harold N.	E-mail address: (to be used concerning this matter, please	•	956-7		ECRETIVEY LLAHASSE	13 111 11	
	of Person	at (de & Daytime Te		inc:	P	1 7
	for the following amount:	Area Co	de & Daytime Te	repriorie Number	107.01 C17.01	PH 12: 20	•
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C	•	S160.00 F Certificat			

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nai	me:		·
The name of the L	imited Liability Compar	ny is:	
Freedom Home Watch	LLC		
(M	ust end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad	ldress:		
The mailing address	ss and street address of t	he principal office of the Limited Li	ability Company is:
Principal Office A	Address:	Mailing Address:	
1609 7th Street W		1609 7th Street W	
Palmetto, FL 34221		Palmetto, FL 34221	
(The Limited Liability Consumers and State of Consumers)	ompany cannot serve as its own active Florida registration.)	tered Office, & Registered Agent's Registered Agent. You must designate an individue the registered agent are:	ridual or another SECRETAR SECRETAR SS
	1	Name	FO P
	1609 7th Street W		PH 12: 20 OF SIATE EFFLORIO
	Florida stre	eet address (P.O. Box <u>NOT</u> acceptable)	20 20
	Palmett	o, FL 34221	
	Ci	ity, State, and Zip	

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:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member	,	
	Harold N. Britt	
MGRM	1609 7th Street W	
	Palmetto, FL 34221	
		
•	2013 FALL	
		*
		4
		, 1
·		j •
<i>a</i> .	다	*****
(Use attachment if necessary)	R R 2	
	Sau Common L	- \
LE V: Effective date, if other than the d	ate of filing: (OPTIONA	L)
	pe specific and cannot be more than five busines	s da
or 90 days after the date of filing.)		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		
	1 -	
Harrist	2 BA	
Signature of a member of	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Harold N. Britt

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)