La0000351415

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(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
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(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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COVER LETTER

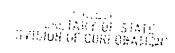
Tallahassee, FL 32314

	Registration So Division of Co			
CUD IEZ	Freedom 3	LLC		
SUBJEC		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Michael Gulledge		
			Name of Person	
		Freedom 3 LLC		
			Firm/Company	
		2611 Bayshore Blvd., Apt	1403	
			Address	
		Tampa, FL 33629		
			City/State and Zip Code	
		mgulledge@handandstone.c	com to be used for future annual report noti:	fication)
For furth	ner information of	concerning this matter, please co		,
Michael	Gulledge		813 523-8417	
	Name (of Person	at ()Area Code Daytime	e Telephone Number
Enclosed	d is a check for t	he following amount:		
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration Division of O	Section	Street Address: Registration Sec Division of Cor	
	P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 HAR 31 PH 3: 41

Freedom 3 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co.	mpany were filed on 08/17/2020	and assigned
Florida document number L20000251415	٠	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	

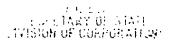
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter t</u>	he name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
- · · · · · · · · · · · · · · · · · · ·	Enter Florida street address	
	, Flor	r ida Zip Code
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 605, 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member



<u>Title</u>	<u>Name</u>	Address 21 MAR 31 PM 3: 41	Type of Action
AMBR	Michael Gulledge	2611 Bayshore Blvd., Apt 1403	■Add
		Tampa, FL 33629	□Remove
			□ Change
AMBR	Deborah Guliedge	2611 Bayshore Blvd., Apt 1403	■Add
		Tampa, FL 33629	□Remove
			□Change
			🗆 Add
			□Remove
		4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	□ Change
			🗀 Add
			□Remove
			□ Change
			□Add
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			□Change
			□Add
			□Remove
			□Change

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fective date, if other an effective date is listed ote: If the date insert incument's effective date.	l, the date must be spec ted in this block does	ific and cannot be s not meet the ap	prior to date of pplicable statu	filing or more ditory filing rec	han 90 days a	otiona fler filin this da	ιέ.) P	ursuant to 605.02 Il not be listed
ecord specifies a dela is filed.	iyed effective date, b	out not an effecti	ive time, at 12	:01 a.m. on th	e earlier of:	(b) T	The 9	Oth day after th
March 28		2021						
	Sal Su	lledge re of a memper or	·					
	Signatur	e of a member or	authorized repr	esentative of a	member			

Filing Fee: \$25.00