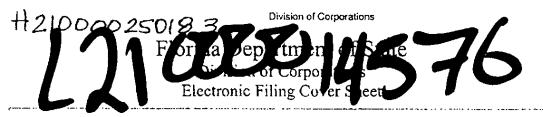
1/19/2021



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(((H21000025018 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GILLIGAN, GOODING, FRANJOLA & BATSEL P.A

Account Number : I20010000016

Phone : (352)867-7707 Fax Number : (352)867-0237

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:__jgooding@ocalalaw.com

FLORIDA LIMITED LIABILITY CO.

Freedom Commons, LLC

Certificate of Status	0
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H21000025018 3

p.2

H210000250183

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3528677707

Freedom Commons, LLC

ARTICLE II - Address:

The street and mailing address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1415 SW 17th Street Ocala, FL 34471

1415 SW 17th Street Ocala, FL 34471

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration).

The name and the Florida street address of the registered agent are:

W. James Gooding III Name

1531 SE 36th Avenue Florida street address (P.O. Box is NOT acceptable)

> Ocala, FL 34471 City, 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 605, F.S.

Registered Agent's Signature (REQUIRED)

1

p.3

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
<u>MGR</u>	F. Christopher Armstrong 1415 SW 17th Street Ocala, FL 34471		
		2021 J	. مولومه د
		JAN 19 PM	
		PM 12: 27	Mary!

ARTICLE V: Effective Date, if other than the date of filing: January 18, 2021 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing).

ARTICLE VI: Other Provisions, if any.

These Articles can be amended by vote or written consent of the holders of a majority of the membership interests.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 600.0203(1) (b), 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.)

> W. James Gooding III As authorized representative of a member Typed or printed name of signce

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