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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **P: 866.625.0838 F: 866.625.0839** COGENCYGLOBAL.COM

Account#: I2000000088 If there are any issues please contact Patrice at 850-202-9071

Date:04	4/15/2024	
Name:	Patrice Rush	
Reference #:	0004000	
Entity Name:	COLONIAL F	REEDOM ACQUISITION LLC
✓ Articles	of Incorporation/Authori	zation to Transact Business
🗌 Amendr	nent	
🗌 Change	of Agent	
🔲 Reinsta	tement	
Convers	sion	
🗍 Merger		
🔲 Dissolut	tion/Withdrawal	
Fictitiou	s Name	
Other		
Authorized Am		
Signature:	Part	

EUROPEAN HQ COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND & WALES. REGISTERY #801072 6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080 ASIA PACIFIC HQ COGENCY GLOBAL (HK) LIMITED A HONG KONG UMITED COMPANY UNIT B, 1/F, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG P: +852.2682.9633 F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 12000000088 If there are any issues please contact Patrice at 850-202-9071

Date:04	4/15/2024		
Name:	Patrice Rush	<u> </u>	
Reference #:			
Entity Name:		EEDOM ACQUISITION LLC	
✓ Articles	of Incorporation/Authoriza	ion to Transact Business	
🗌 Amendn	nent		
🗌 Change	of Agent		
🔲 Reinstat	ement		
Convers	ion		
Merger			•
🔲 Dissoluti	ion/Withdrawal		مند أ
Fictitious	s Name		j
Other		61 2	

Authorized Amo	ount:	\$125.00	
Signature:		M	

**EUROPEAN HQ** COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND 3 WALES, REGISTRY #8010712 6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080

(1) ASIA PACIFIC HQ COGENCY GLOBAL (HK) LIMITED AHONG KONG LIMITED COMPANY UNIT B, I/F, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG P: +852.2682.9633 F: +852.2682.9790

# COVER LETTER

TO: **New Filing Section Division of Corporations** Colonial Freedom Acquisition LLC SUBJECT: \_ 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: Kathleen Mackay Name of Person Ginsberg Jacobs LLC Firm/Company 300 South Wacker Drive, #2750 Address Chicago, IL 60606 City/State and Zip Code kmackay@ginsbergjacobs.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathleen Macka 483-9851 815 at ( Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,

> <u>Mailing Address</u> New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Street Address</u> New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE 1 - Name:**

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The name of the Limited Liability Company is:

# Colonial Freedom Acquisition LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
719 Cattlemen Rd	719 Cattlemen Rd
Sarasota, FL 34232	Sarasota, FL 34232

#### 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:

Wal	ter Weiler	
	Name	
719 0	attlement Rd	
Florida street addres	s (P.O. Box <u>NOT</u> ac	ceptable)
Sarasota	Florida	34232
City	State	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..

Water Z Weiken

Iter Z. Weiler (Apr 12, 2024 15:08 EDT)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address;
"MGR" = Manager AMBR	Edward Ryder 2 W Delaware Place, Unit 2005 Chicago, IL 60610
AMBR	Walter Weiler 719 Cattlemen Road Sarasota, FL 34232
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_. (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.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

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<b>REQUIRED SIGNATURE:</b> $\square \square \square \square \square$		-
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UNIN Praer		<b></b> • ·
Signature of a member or an authorized representative of a member.	•	<u> </u>
This document is executed in accordance with section 605.0203 (1) (b). Florida	a Statute	s.
I am aware that any false information submitted in a document to the Department	nt of Sta	te
constitutes a third degree felony as provided for in s.817.155. F.S.	· · >	
		••
Edward Ryder Typed or printed name of signee	' 1 y FO	

## 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)