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

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COVER LETTER

	Registration Section Division of Corporations
SUBJECT	Freedom 1 LLC
	Name of Limited Liability Company
The enclos Existence,	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please retu	arn all correspondence concerning this matter to the following:
	Mike Cavanaugh Name of Person
	Freedom 1 LLC Firm/Company
	280 Business PK Circle Ste406
	Staugustine Fla 32095 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further	r information concerning this matter, please call:
	Mike Cavanaugh at (219) 476-1393 Name of Person Area Code & Daytime Telephone Number
R P	AAILING ADDRESS: Division of Corporations Legistration Section Division of Corporations Registration Section Co. Box 6327 Clifton Building Fallahassee, FL 32314 Control of Corporations Registration Section Clifton Building Callahassee, FL 32301
	d is a check for the following amount: 125.06 Filing Fee \$\bigsup \text{\$130.00 Filing Fee & Certificate Copy} \text{\$\$160.00 Filing Fee, Certificate of Status & Certified Copy} \text{\$\$0 Status & Certified Copy} \$\$0 St



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2011

MIKE CAVANAUGH 280 BUSINESS PARK CIRCLE, STE. 406 ST. AUGUSTINE, FL 32095

SUBJECT: FREEDOM 1, LLC Ref. Number: W11000047007

We have received your document for FREEDOM 1, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The enclosed certificate of formation and certificate of amendment aren't acceptable for qualifying a foreign LLC in this office.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 911A00021095

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Freedom 1 LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Indiana (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-5863024 (FEI number, if applicable)
4. Date of Organization) 5. Oer Detua (Duration: Year limited hiability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
321, 112 115 HUDURD Sto 201
Val Paraiso In 46385
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Mike Cavanaugh 280 Business Pkarste406 Staugustine Flazzo David antonson 336 w US HWY 30 Ste 201 Valparaiso In 465
Mike Kibler 336W USHW430 Ste 201 ValparaisoIn 46385
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Services
mund of
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., 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.)
Mi Ke Cavanaliah

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
	Freedom 2 LLC
If	unavailable, the alternate to be used in the state of Florida is:
2.	The name and the Florida street address of the registered agent and office are:
	Mike Cavanaugh
	280 Business PK Cir Ste 406 Florida Street Address (P.O. Box NOT ACCEPTABLE)
-	St. augustine FL 32095 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 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Charles P. White, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

FREEDOM 1, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on November 22, 2006, and was in existence or authorized to transact business in the State of Indiana on September 19, 2011.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Nineteenth Day of September, 2011.

Charles P. White, Secretary of State

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