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2018 OCT -1 PH 1:41
SECRETARY OF STATE

R. WHITE OCT 08 2018

COVER LETTER

TO:

Registration Section

Div	dsion of Corporation	DIIS		
SUBJECT:		Freeman Corporate, LLC		
CONSTITUTE I		Name of	Limited Liability Company	
				ransact Business in Florida," Certificate ty company to transact business in Flori
Picase return	all correspondence	concerning this matter to the	e following:	
	Tanya Wilson			
		7	lame of Person	
	Freeman			
		F	irm/Company	
	1600 Viceroy,	Suite 100		
			Address	
	Dailas, TX 75	235		
		City/S	State and Zip Code	
	tanya,wilson@f	reemanco.com		
		E-mail address: (to be use	d for future annual report no	tification)
For further in	formation concerning	ng this matter, please call:		
Tan	ya Wilson		214 445-16 at ()	377
	Name	of Contact Person		ytime Telephone Number
Divi Regi P.O.	HING ADDRESS: sion of Corporation istration Section Box 6327 ahassee, FL 32314		Division Registral Clifton F 2661 Ex	F ADDRESS: of Corporations tion Section Building coutive Center Circle see, FL 32301
	check for the follow 125.00 Filing Fee	ving amount: \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 2018 OCT -† PM 1:41

ATE L

. Freeman Corporate 11	THON 605.0902, FLORIDA STATUTES, THE ISINESS INTHE STATE OF FLORIDA: .C		MLLAHASSEF
(Name of Foreign	Limited Liability Company; must include "Lin	nited Liability Company," "L.L.C.," or "LLC	.")
if nome unavailable, enter alternate n	ame adopted for the purpose of transacting business in	Florida The alternate name most include "Limited I	Jabrity Company," "L.L.C," or "LLC,")
2. Nevada		3. 83-0378303	
(Jurisdiction under the law of wh	nich foreign limited liability company is organized)	(FEI nu	mber, if applicable)
1	do a financial bulleting the day of the	(for a resident logs)	
	(Date first transacted business in Florida, if proof (See sections 605,0904 & 605,0905, F.S. to dete	ermine penulty liability)	
5. 1600 Viceroy, Suite 10 (Street Address of F	00	6. 1600 Viceroy, Suite 100 (Meiling A	ddress
Dallas, TX 75235	- The span Office y	Dallas, TX 75235	
 Name and street addres 	s of Florida registered agent: (P.O. B	ox NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street	·	
	Tallahassee	, Florida 32301 (Zipe	
	(City)	(Zip c	ode)
lesignated in this applicate comply with the provisi	tance: gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prop	t as registered agent and agrec to a	ct in this capacity. I further agre
lesignated in this applicate comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prop s of my position as registered agent. Corporation Service Company By:	this registered agent and agree to a per and complete performance of management of the Brien Courtney	ct in this capacity. I further agrey y duties, and I am familiar with
designated in this application comply with the provision and accept the obligations	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the property of	As registered agent and agree to a per and complete performance of management of the Brien Courtney Asst. V. Pres.	ct in this capacity. I further agrey y duties, and I am familiar with
designated in this applicate comply with the provision accept the obligations 8. The name, title or capa	gistered agent and to accept service of the appointment ons of all statutes relative to the property of the person	Brien Courtney Asst. V. Pres. has/have authority to manage is/are.	ct in this capacity. I further agrey y duties, and I am familiar with
designated in this applicate comply with the provision and accept the obligations 8. The name, title or capa	gistered agent and to accept service of tion, I hereby accept the apparatment ons of all statutes relative to the property of the person of th	As registered agent and agree to a per and complete performance of management of the Brien Courtney Asst. V. Pres.	ct in this capacity. I further agrey y duties, and I am familiar with
designated in this applicate comply with the provision accept the obligations 8. The name, title or capa	gistered agent and to accept service of the appointment ons of all statutes relative to the property of the person	Brien Courtney Asst. V. Pres. has/have authority to manage is/are.	et in this capacity. I further agrey y duties, and I am familiar with
designated in this applicate comply with the provision and accept the obligations 8. The name, title or capa	gistered agent and to accept service of tion, I hereby accept the apparatment ons of all statutes relative to the property of my position as registered agent. Corporation Service Company By: (Peratical agent and Address: Freeman Holding, LLC	Brien Courtney Asst. V. Pres. has/have authority to manage is/are.	et in this capacity. I further agrey y duties, and I am familiar with
designated in this applicate comply with the provision and accept the obligations 8. The name, title or capa	gistered agent and to accept service of the proportion, I hereby accept the apparatment ons of all statutes relative to the propost of my position as registered agent. Corporation Service Company By: Peratical agent of the person(s) who Name and Address: Freeman Holding, LLC 1600 Viceroy, Suite 100	Brien Courtney Asst. V. Pres. has/have authority to manage is/are.	et in this capacity. I further agrey y duties, and I am familiar with
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lesignated in this applicate ocomply with the provisional accept the obligations 8. The name, title or capa Title or Capacity: Managing Member	gistered agent and to accept service of toon, I hereby accept the appointment ons of all statutes relative to the proposal of the person of the	Brien Courtney Asst. V. Pres. has/have authority to manage is/are.	et in this capacity. I further agrey y duties, and I am familiar with
designated in this application comply with the provisional accept the obligations. 8. The name, title or capa Title or Capacity: Managing Member (Use attachments if necess	gistered agent and to accept service of ton, I hereby accept the apparatment ons of all statutes relative to the property of the person	Brien Courtney Asst. V. Pres. has/have authority to manage is/are. Title or Capacity:	et in this capacity. I further agree y duties, and I am familiar with
designated in this applicate comply with the provision of accept the obligations. 8. The name, title or capa Title or Capacity: Managing Member (Use attachments if necession.) 9. Attached is a certificate jurisdiction under the law.	gistered agent and to accept service of the iton, I hereby accept the appointment ons of all statutes relative to the proposal my position as registered agent. Corporation Service Company By: (Verticed agent and Address: Froman Holding, LLC 1600 Viceroy, Suite 100 Dallas, TX 75235 sary) of existence, no more than 90 days of of which it is organized. (If the certification, it is organized. (If the certification) is a constant.	Brien Courtney Asst. V. Pres. has/have authority to manage is/are. Title or Capacity:	Name and Address: having custody of records in the
designated in this applicant to comply with the provisional accept the obligations. 8. The name, title or capative Managing Member (Use attachments if necessary in the provision of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the translator must be seen to complete the law of the law o	gistered agent and to accept service of the iton, I hereby accept the appointment ons of all statutes relative to the proposal of the person of the	Brien Courtney Asst. V. Pres. has/have authority to manage is/are. Title or Capacity: Id, duly authenticated by the official cate is in a foreign language, a transle	Name and Address: having custody of records in the ation of the certificate under oath

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, FREEMAN CORPORATE, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 3, 2013, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 24, 2018.

Ballons K. Cegowske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20180924-1671