

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117527

Entity Name: FREEDOM RETIREMENT PLANNING, LLC

Current Principal Place of Business:

123 N. INDUSTRIAL DRIVE
SUITE A
ORANGE CITY, FL 32763

Current Mailing Address:

PO BOX 740344
ORANGE CITY, FL 32774 US

FEI Number: 20-4025980

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WESTFALL, CHRISTOPHER L
123 N. INDUSTRIAL DRIVE
SUITE A
ORANGE CITY, FL 32763 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name WESTFALL, CHRISTOPHER L
Address 123 N. INDUSTRIAL DRIVE
SUITE A
City-State-Zip: ORANGE CITY FL 32763

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER L WESTFALL

OWNER

01/08/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date