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S. HAWKES
JUN 3 0 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: FREEDOM SERVICE SOLUTIONS GROUP, LLC Name of Limited Liability Company			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
William A. HARWOOD, JR. Name of Person			
FREEDOM SERVICE SOLUTIONS GROUP, LLC Firm/Company			
324 ORANGE TREE DRIVE, UNIT 2A Address			
ATLANTIS FL 33462			
ATLANTIS FL 33462 City/State and Zip Code Freedomservices group Qyahoo. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
William A. Harwood, Jr. at (561) 758-1858 Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREEDOM SERVICE SOLUTION (Name of the Limited Liability Company) (A Florida Limited Li	ONS GROUP, LLC
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company	were filed on
Florida document number <u>L09000046869</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2810 HYPOLUXO ROAD
(Principal office address MUST BE A STREET ADDRESS)	LANTANA, FL 33462
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
induing duaress may be at tost of the boar	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Together the desired the second transfer and transf	·
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> **Type of Action** MARK KUEBLER P.O. BOX 471 LAKE WORTH, FL MGRM Remove ☐ Add Remove \prod Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010. Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00