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SECRETARY OF STARLINE SECRETARY OF CORPORATIONS
13 OCT 21 PH 1: 19

Amund 10/25/13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _ DOCUMENT NUMBER:		P06000	01038		AR, INC.
The enclosed Articles of Amenda	ent and fee are su	bmitted for filing			
Please return all correspondence of	oncerning this ma	tter to the followi	ng:		
	JOS	SEPH SYS	SOL, S	SR.	
		Name of Cont	act Persor	ı	
F	REEDOM	PLUMBIN	G & S	OLAR	, INC.
		Firm/ Con	npany		
	21707 HARDCASTLE RD.				
	Address				
	SPRI	NG HILL, I	FL 34	610	
		City/ State and	I Zip Code	;	
(gayle@abs	soluteacco	untino	ISVC.C	om
	address: (to be us				
For further information concerning			352		398-6031
Name of Contact P	erson	at (Area Coo	_ <i>)</i> le & Dayt	ime Telephone Number
Enclosed is a check for the following	ng amount made p	payable to the Flor	rida Depa	rtment of	State:
	75 Filing Fee & ficate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	Certif Certif (Addi	0 Filing Fee icate of Status ied Copy tional Copy llosed)
Mailing Addres				Address	
Amendment Sec Division of Corp	Amendment Section Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL	2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment Articles of Incorporation

FREEDOM PLUMBING & SOLAR, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P06000010381

endment(s) to

(Document Number of Corp	oration (if known)		
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit C</i>	Corporation adopts the following	; amendme
A. If amending name, enter the new name of the corpor	ation:		
name must be distinguishable and contain the word "co". "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	ic," or "Co". A profess	or "incorporated" or the ab-	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS.)	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent		enter the name of the	13 OCT 21
			77
(F	lorida street address)		-
New Registered Office Address:	(City)	, Florida(Zip Code)	•
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	amiliar with and accept to		
Signature of New Reg	istered Agent, if changing	g	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	S	JOSEPH HAWK	KINS 21707 HARDCASTLE RD)
Add			SPRING HILL	
Remove			FLORIDA 34610	<u>-</u> -
2) Change	S	BRUCE INMAN	N 410 HALE AVE.	_
Add			BROOKSVILLE	
Remove			FLORIDA 34601	_
3) Change				_
Add				_
Remove				_
4) Change		_		_
Add				_
Remove				- ·
5) Change				_
Add				_
Remove				-
6) Change				_
Add				_
Remove				

If amending or adding additional Article (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	N/A
N	

The date of each amendment(s) adoption:	OCTOBER 14, 2013	, if other than the
date this document was signed.		
Effective date if applicable:	OCTOBER 14, 2013	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	
	mendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
DatedOCTOB	ER 14, 2013	
Signature	god A gul hr.	
selected, by an i	resident or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)	
	JOSEPH SYSOL, SR.	
	(Typed or printed name of person signing)	_
	PRESIDENT/TREASURER	
	(Title of person signing)	_