

POL0000021047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

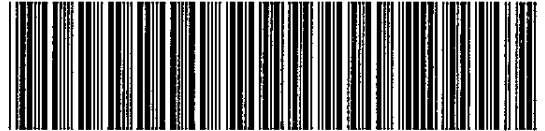
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAREFREE WINDOWS, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO6000021047

The enclosed Articles of Correction and fee are submitted for filing.

* Please return all correspondence concerning this matter to the following:

Donna Butko
(Name of Contact Person)

Accucount, Inc.
(Firm/Company)

3629 WEBBER ST, STE B-4
(Address)

SARASOTA, FL 34232
(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Butko at (941) 922-9288
(Name of Contact Person) (Area Code & Daytime Telephone Number)

* Enclosed is a check for the following amount:

- | | |
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| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF CORRECTION

for

CAREFREE WINDOWS, INC.

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

P06000021047

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct FLA. Profit Corporation

(Document Type Being Corrected)

filed with the Department of State on Feb 10, 2006

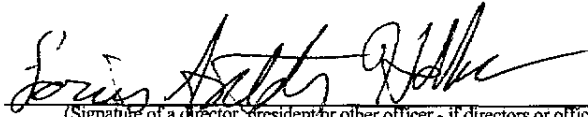
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

failed to name 2nd officer of corporation

Correct the inaccuracy, incorrect statement, or defect:

TITLE: TREAS.
JEREMY SCOTT McCLELLAND
225 N. SHADE AVE.
Apt. 211
SARASOTA, FL 34237



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Louis A. Hoffpauir

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00