

LD6000094200

JOHN ANDREWS & ASSOCIATES, LLC  
20110 SEVENTY-FOURTH AVENUE EAST  
BRADENTON, FLORIDA 34202

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

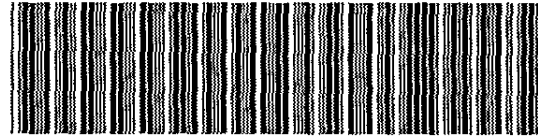
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*J. Andrews*

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 25 PM 2:31

September 21, 2006

State of Florida  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Subject: Absolute Appliance Repair , LLC

The enclosed Articles of Organization are submitted for filing.

Please return all correspondence concerning this matter to the following:

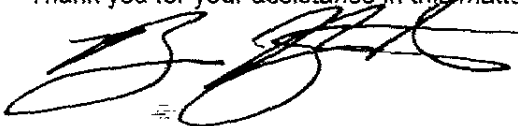
Brian K. Bates  
Absolute Appliance Repair, LLC  
1905 39<sup>th</sup> Street West  
Bradenton, Florida 34205:

For further information concerning this matter, please call:

Brian K. Bates at (941) 720-0106

Enclosed is a check in the amount of \$125.00 payable to the Florida Department of State in full payment of this LLC registration.

Thank you for your assistance in this matter.



Brian K. Bates

ARTICLES OF ORGANIZATION  
FOR  
ABSOLUTE APPLIANCE REPAIR, LLC  
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I ~ Name:

The name of the Limited Liability Company is Absolute Appliance Repair, LLC.

ARTICLE II ~ Address:

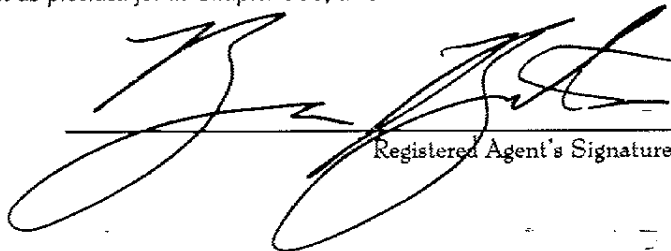
The mailing address and street address of the principal office of the Limited Liability Company is: 1905 39<sup>th</sup> Street West, Bradenton, Florida 34205

ARTICLE III ~ Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Brian K. Bates  
1905 39<sup>th</sup> Street West  
Bradenton, Florida 34205

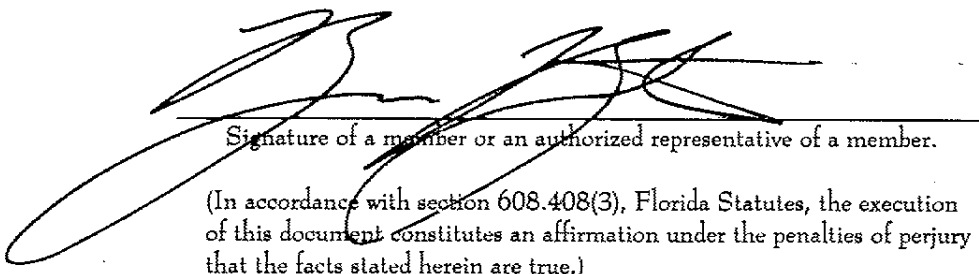
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating 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..*

  
\_\_\_\_\_  
Registered Agent's Signature

ARTICLE IV ~ Managers or Managing Members

<u>Title:</u>	<u>Name and Address:</u>
MGRM	Brian K. Bates 1905 39 <sup>th</sup> Street West Bradenton, Florida 34205
MGRM	Dustin J. Bates 1905 39 <sup>th</sup> Street West Bradenton, Florida 34205

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**Brian K. Bates**

Typed or printed name of signee

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