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(Requestor's Name)						
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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations						
SUBJE	ABSOLUTE BOOKKEEPING AND BUSINESS SERVICES, LLC						
	(Name of Limited Liability Company)						
The end	closed Articles of Organization and fee(s) are submitted for filing.						
	Please return all correspondence concerning this matter to the following:						
ELLEN BAJENTING							
(Name of Person)							
	ABSOLUTE BOOKKEEPING AND BUSINESS SERVICES, LLC						
	(Firm/Company)						
_	2874 SNOWY OWL COURT						
	(Address)						
	LAKE MARY, FL 32746						
	(City/State and Zip Code)						
For furt	ther information concerning this matter, please call:						
	ELLEN BAJENTING at (407) 323-9677						
	(Name of Person) (Area Code & Daytime Telephone Number)						

STREET ADDRESS:

Registration Section
Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 24, 2004

ELLEN BAJENTING ABSOLUTE BOOKKEEPING AND BUSINESS SERVIC 2874 SNOWY OWL COURT LAKE MARY, FL 32746

SUBJECT: ABSOLUTE BOOKKEEPING AND BUSINESS SERVICES, LLC Ref. Number: W04000032086

Upon receipt of your letter and/or check(s) totaling \$125.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 404A00051754

Michelle Hodges Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	PING AND BUSINESS SERVICES, LLC		
RTICLE II - Address: he mailing address and street addre	ss of the principal office of the Limited Liability Compan		
rincipal Office Address;	Mailing Address: 2874 SNOWY OWL COURT		
874 SNOWY OWL COURT			
AKE MARY, FL 32746	LAKE MARY, FL 32746		
			
DTICLE III Degistered Agent	Desirtared Office & Desictored Apont's Signatures		
	Registered Office, & Registered Agent's Signature:		
RTICLE III - Registered Agent, he name and the Florida street addi			
he name and the Florida street addi	ess of the registered agent are:		
he name and the Florida street addi			
he name and the Florida street addr	ess of the registered agent are: LLEN BAJENTING Name		
he name and the Florida street addi	ess of the registered agent are: LLEN BAJENTING Name 4 SNOWY OWL COURT		
he name and the Florida street addi	ess of the registered agent are: LLEN BAJENTING Name		
he name and the Florida street addi	ess of the registered agent are: LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable)		
he name and the Florida street addi	ess of the registered agent are: LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable)		
he name and the Florida street address E 287 Florida street	LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable) LAKE MARY FLORIDA 32746 City, State, and Zip		
the name and the Florida street additional stree	LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable) LAKE MARY FLORIDA 32746 City, State, and Zip accept service of process for the above stated limited limits		
the name and the Florida street additional street additional street additional street and to at the place designated in this certification.	LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable) LAKE MARY FLORIDA 32746 City, State, and Zip		
the name and the Florida street additional street additional street additional street and the place designated agent and the place designated in this certificat in this capacity. I further agree to a plete performance of my duties, and it	LLEN BAJENTING Name 4 SNOWY OWL COURT t address (P.O. Box NOT acceptable) LAKE MARY FLORIDA 32746 City, State, and Zip accept service of process for the above stated limited liability accept the appointment as registered agents as		

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member

MGRM	. نستري		ar 175	ELLEN BAJENTING
				2874 SNOWY OWL CT
and the second		•		LAKE MARY, FL 32746
		· .		
MGRM				HULCHERYL WANG
				970 NORTH LAKE DRIVE
				SANFORD, FL 32773
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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

ELLEN BAJENTING

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)