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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

MAR 12 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Absolute Success Group, L.L.C.  
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:

John F. Davis

Name of Person

JFD Consulting Group, LLC

Firm/Company

694 Seabrook Ct., #204

Address

Altamonte Springs, FL 32714

City/State and Zip Code

jfdavis18@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John F. Davis

Name of Person

at ( 407 )

252-4031

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$60.00 Filing Fee,  
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

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Absolute Success Group, L.L.C.

Page 1 of 2

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

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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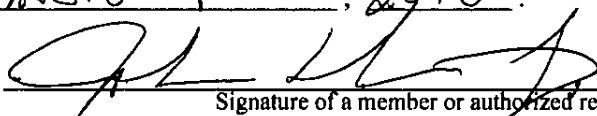
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated MARCH 9, 2010.



Signature of a member or authorized representative of a member

JOHN F. DAVIS

Typed or printed name of signee