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EXAMINER



FLORIDA DEPARTMENT OF STATE. Division of Corporations

November 1, 2011

GREGORY OSBORN 28526 GUINIVERE WAY BONITA SPRINGS, FL 34135

SUBJECT: ABSOLUTE ENTERPRISES, LLC

Ref. Number: W11000055719

We have received your document for ABSOLUTE ENTERPRISES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608,406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is P07000132977.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 711A00024835

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Absolute Enterprises, LLC	
Name of Limited L	iability Company
The enclosed Articles of Organization and fee(s) are sub-	-
Please return all correspondence concerning this matter to	o the following:
Gregory A Osborn	
Na	me of Person
Fir	m/Company
28526 Guinivere Way	
	Address
Bonita Springs, FL 34135	
Bonita Springs, FL 34135 City/Str Ab solute Pw G Holman E-mail address: (to be used for fi	ate and Zip Code
For further information concerning this matter, please cal	
Gregory A Osborn	(239 8986521
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	<u> </u>
\$125.00 Filing Fee \$\bigs\tag{\text{\$130.00 Filing Fee & Certificate of Status}}\$	\$155.00 Filing Fee & \$160.00 Filing Ese, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Absolute Enterprises, LLG Absolute Enterprises, LLG (Must end with the words "Limited Liability")	y Company, "L.L.C.," or "LLC.")	<u>- : </u>	_	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Lia	bility	Comp	any is:
Principal Office Address:	Mailing Address:			
Gregory A Osborn 28526 Guinivere Way	Gregory A Osborn 28526 Guinivere Way		_	
Bonita Springs, FL 34135	Bonita Springs, FL 34135		-	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individ	iual or a	nother	
Gregory A Osborn			=	
Name Name		HASSI	O I AON 1107	Part of the second
28526 Guinivere Way			產	[7]
	ress (P.O. Box <u>NOT</u> acceptable)	CES.	39 2.	-
Bonita Springs	FL34135	37	£	

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member MGRM	Gregory A Osborn
	28526 Guinivere Way
	Bonita Springs, FL 34135
	<u> </u>
	
(Use attachment if necessary)	
LE V: Effective date, if other than the	he date of filing: (OPTIONA

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. I am aware that any false information submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.)

CREGORY A. OSBORN

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)