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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Empi1	Address.	dfaherty@absoluteadvisers.com

FLORIDA LIMITED LIABILITY CO. AIA FINN ASSOCIATES GP, LLC

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ARTICLES OF ORGANIZATION FOR AIA FINN ASSOCIATES GPALLO -6 PM 4:51

ARTICLE I Name

UF STATE - FIASSEE, FL

The name of this Limited Liability Company is:

Τo

AIA FINN ASSOCIATES GP. LLC

ARTICLE II Principal Place of Business and Mailing Address

The mailing address and the street address of the principal office of this Limited Liability Company is:

82 S. BARRETT SQUARE, UNIT 2G ROSEMARY BEACH, FL 32461

ARTICLE III Purpose

The purpose for which this Limited Liability Company is organized is:

FOR ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV Registered Agent, & Registered Office

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

ARTICLE V Management; Authorized Representative

This Limited Liability Company shall be managed by its sole member (the "Authorized Representative"). The name and address of the Authorized Representative are as follows:

ABSOLUTE INVESTMENT ADVISERS, LLC 82 S. BARRETT SQUARE, UNIT 2G ROSEMARY BEACH, FL 32461

[Signatures follow on next page.]

(In accordance with section 605.0203(1)(b), 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.)

ABSOLUTE INVESTMENT ADVISERS, LLC

By: Name: James Compson

Title: Manager

(Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization. I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performs of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.)

CT CORPORATION SYSTEM

By: Meredith Hellwig
Title: Assistant Secretary

FILING FEES: \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent