

P03000004674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

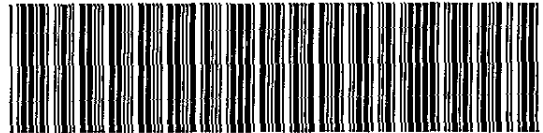
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

g/ll

TRANSMITTAL LETTER

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

SUBJECT: ABSOLUTE, CORP.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: HAROLD SCOTT
Name (Printed or typed)

2830 SHINING WILLOW TERR.
Address

ORLANDO, FLA. 32808
City, State & Zip

407-296-8134
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ABSOLUTE, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2830 SHINING WILLOW TERR,
ORLANDO, FLA. 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

HAROLD SCOTT/CEO

I HAROLD SCOTT WILL ACT AS CEO UNTIL I'M ABLE TO FIND & HIRE,
A PRESIDENT TO MY LIKING

ARTICLE VI REGISTERED AGENT

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

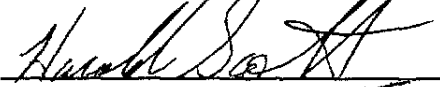
HAROLD SCOTT
2830 SHINING WILLOW TERR
ORLANDO, FLA 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HAROLD SCOTT
2830 shining willow terr
ORLANDO, FLA 32808

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent /Incorporator

01-03-2003
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA