

**2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L14000111119

**Entity Name:** ABSOLUTE MANAGEMENT LLC

**Current Principal Place of Business:**

12585 NEW BRITTANY BLVD.  
FORT MYERS, FL 33907

**Current Mailing Address:**

12585 NEW BRITTANY BLVD.  
FORT MYERS, FL 33907

**FEI Number:** 30-0837806

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIONOPOULOS, MICHAEL E  
12585 NEW BRITTANY BLVD.  
FORT MYERS, FL 33907 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** MICHAEL CHIONOPOULOS

01/05/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            CHIONOPOULOS, MICHAEL  
Address        12585 NEW BRITTANY BLVD.  
City-State-Zip: FORT MYERS FL 33907

Title            MANAGER  
Name            CAZA, JAMES  
Address        12585 NEW BRITTANY BLVD  
City-State-Zip: FORT MYERS FL 33907

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL CHIONOPOULOS

MANAGER

01/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date