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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MC SEPTCENGINEERING, L.L.C. (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CHRIS McPHERSON, P.E. (Name of Person)		
ACTION ENGINEERING SERVICES, INC. (Firm/Company)		
909 D. TAMIAMI TR.		
PORT CHARLOTTE, FL 33953 (City/State and Zip Code)		
For further information concerning this matter, please call:		
MARK KESTNER at (941) 637 4780 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee Status Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
STREET ADDRESS: MAILING ADDRESS: STREET ADDRESS:		

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
MC SEPTIC ENGINEE	RING, L.LC.
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ST IMIAIMAT G POP	SAME_
PORT CHARLOTTE FL 339(73	
ARTICLE III - Registered Agent, Registered C	Office, & Registered Agent's Signature:
The name and the Florida street address of the reg	gistered agent are:
CHRIS MCPT Name	HERSON, P.E.
909 D. TAM Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
PORT CHARLOTTE City, State, and	FL 33953 - 1 Zip
liability company at the place designated in this registered agent and agree to act in this capacity, statutes relating to the proper and complete perfe	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S
Registered Agent's S	ignature 7005 JA 770 JA

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MARK KESTNER 301 W. WILLIAM ST PUNTA GORDA, FL 33950
MGRM	MARY DEUBNER 301 W WILLIAM ST PUNTA GORDA, FL 33950
MGRM	CHRISTOPHER I. MCPHERSON 4007 BILLINGHAM IN NORTH PORT, FL 34288
(Use attachment if necessary) NOTE: An additional article must	be added if an effective date is requested.

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.)

MARK KESTUGIR

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)

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