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	*
Michael Sundin Requester's Name	
133 Love Ridge Cf	
Manasee, FL 32312 City/State/Zip Phone #	528-6554
	Office Use Only
CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):
1. Sundin Septic S (Corporation Name)	Specialists, LLC (Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time _	Certified Copy S
☐ Mail out ☐ Will wait	Photocopy Certificate of Stratus
NEW FILINGS	AMENDMENTS Z
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer#Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY SUNDIN SEPTIC SPECIALISTS, LLC

ARTICLE 1 NAME

The name of the Limited Liability Company shall be:

SUNDIN SEPTIC SPECIALISTS, LLC

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TALLAHASSEE, FLORID!

ARTICLE 2 PRINCIPAL OFFICE

The principal place of business and mailing address of the Limited Liability Company is:

133 Love Ridge Court Tallahassee, Florida 32312

ARTICLE 3 REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and address of the registered agent is:

Michael Edward Sundin 133 Love Ridge Court Tallahassee, Florida 32312

Having been named as registered agent to accept service of process for the above stated limited liability company 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

Date

ARTICLE 4 MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each Manager or Managing Member shall be:

MGRM:

Micheael Edward Sundin

MGRM:

Cheryl Sundin

MGRM:

Johnathan Bradley Sundin

whose addresses will be the same as the principal office of the Limited Liability Company.

ARTICLE 5 EFFECTIVE DATE

This Limited Liability Company shall be effective immediately upon filing.

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.)

Michael Edward Sundin
Name of signee