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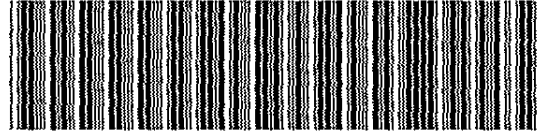
(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL Star Septic LLC
(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:

Evelyn Leigh Summers
(Name of Person)

All Star Septic LLC
(Firm/Company)

13225 C.R. 39 South
(Address)

Lithia
(City/State and Zip Code)

For further information concerning this matter, please call:

Evelyn "Leigh" Summers at (813) 654-8773
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

All Star Septic, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

13225 C.R. 39 South
Lithia, FL 33547

Mailing Address:

SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Evelyn Leigh Sumners

Name

13225 C.R. 39 South

Florida street address (P.O. Box **NOT** acceptable)

Lithia FL 33547

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Evelyn Leigh Sumners

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGM

Evelyn Leigh Summers
13225 C.R. 39 South
Lithia, FL 33547

MGRM

Peter J. Jones, Jr
13225 C.R. 39 South
Lithia, FL 33547

MGRM

Debra A. Belch
13225 C.R. 39 South
Lithia, FL 33547

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Evelyn Leigh Summers
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.)

Evelyn Leigh Summers
Typed or printed name of signer

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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TALLAHASSEE, FLORIDA

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Registered Septic Tank Contractor



EVELYN L. SUMMERS
13225 CR 39 SOUTH
LITHIA FL 33547-

ALL STAR SEPTIC

Business Authorization: SA0061334

SR0061518

Registration Expiration Date: September 30, 2006

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CERTIFICATE OF AUTHORIZATION

SEPTIC TANK CONTRACTING

The Florida Department of Health hereby certifies the business or entity named below has satisfied the requirements of Part III, Chapter 489, Florida Statutes; for septic tank contracting and has been duly authorized by the department to provide septic tank contracting services under the name of:

ALL STAR SEPTIC

SA0061334

Authorization Number

June 20, 2006

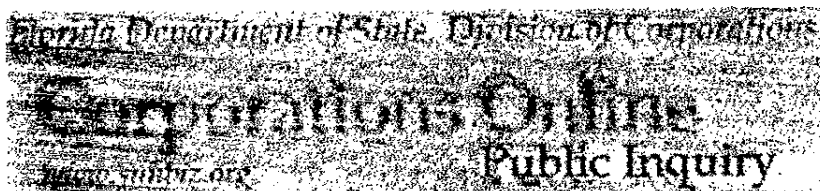
Date Issued

March 31, 2007

Expiration Date

Jeb Bush, Governor
DOH 4075, 1, 1997

M. Rony Francois, M.D., M.S.P.H., Ph.D.
Secretary



ALL STAR SEPTIC
13225 C. R. 39 SOUTH
LITHIA, FL 33547

Document Number
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ACTIVE

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Expiration Date
12/31/2010

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Owner Information

Name & Address	FEI Number	Charter Number
EVELYN, LEIGH SUMMERS 13225 C.R. 39 SOUTH LITHIA, FL 33547	NONE	NONE

Document Images

Listed below are the images available for this filing.

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