

LD7000024920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

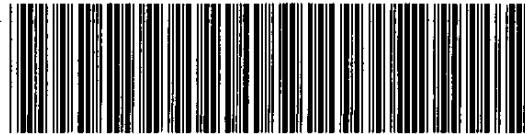
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

LS  
12/4

Office Use Only



100112567491

12/03/07--01018--019 \*\*25.00

FILED

2007 DEC -3 PM 3:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dunn Rite Septic LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John McClung  
(Name of Person)

Dunn Rite Septic, LLC  
(Firm/Company)

PO Box 621994  
(Address)

Oviedo FL 32762  
(City/State and Zip Code)

For further information concerning this matter, please call:

John McClung at (407) 314 4303  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Dunn Rite Septic, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on Dec. 3, 2007 and assigned document number 407000024920

**SECOND:** This amendment is submitted to amend the following:

Change Manager / member Detail  
From: Title VP - Malone, Joseph  
To: Title VP - Basil L. Rudy  
481 Wilmington Circle  
Duldo, FL 32765

Dated

11/30/2007



Signature of a member or authorized representative of a member

John McClung

Typed or printed name of signee

Filing Fee: \$25.00

2007 DEC -3 PM 3:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED