L19000146292

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9/12/2025

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: SolutionFx	, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rachel Navy		
		Name of Person	
	SolutionFx, LLC		
		Firm/Company	
	13000 Apaloosa Lane		
		Address	
	Fort Myers, Florida 33912		
	rachelnavy@gmail.com	City/State and Zip Code	
	- ·	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Rachel Navy		239 839-3301 at ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 25 JUL 25 ...

SolutionFx, LLC			2025 JUL 25
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our r Liability Company)	2025 JUL 25 AH 9: 24
The Articles of Organization for this Limited L	iability Company	were filed on 6/3/2019	TALL MASSEE STATE and assigned
Florida document number L19000146292			
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited liab	ility company here:	
SolutionFx Construction Services, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	SAME	
(Principal office address MUST BE A STREI	ET ADDRESS)		
Enter new mailing address, if applicable:		SAME	
(Mailing address MAY BE A POST OFFICE	BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:	Rachel Navy		
New Registered Office Address:	13000 Apaloos	a Lane	
(Same)		Enter Florida street a	nddress
,	Fort Myers,		, Florida 33912
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Sarah Rivera	13000 Apaloosa Lane	≅Add
		Fort Myers, FL 33912	□Remove
			Change
			□Add
			□Remove
			□ Change
		 	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		 	□Remove
			Change
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			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			Changa

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ffective date, if oth	ner than the date of filing: (optional)
an effective date is listed	d, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 rted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
	date on the Department of State's records.
	layed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is filed.	
June 19th	2025
ated June 19th	2025
ated June 19th	2025
Dated June 19th	2025 Signature of a member or authorized representative of a member

Typed or printed name of signee