

L14000016759

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: npaindiris@bpslawyers.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SOLUTIONS ACQUISITIONS, LLC

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TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB 21 PM 12:22

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Electronic Filing Menu

Corporate Filing Menu

Help

SEE NAME CHANGE AMENDMENT FOR SOLUTIONS MANUFACTURING, INCORPORATED
SUBMITTED FOR FILING TODAY UNDER FAX AUDIT NUMBER H14000043190 3.
CHANGING ITS NAME TO RJP HOLDINGS, INC.

FEB 25 2013

02/25/2014 12:13 FAX 4074231831
02/21/2014 13:15 FAX 4074231831

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DEAN MEAD ORLANDO

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*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 4280
CONNECTION TEL 000000099994*18506176383
CONNECTION ID
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PGS. SENT 4
RESULT OK

Division of Corporations

Page 1 of 1

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FILE 2ND

(((H14000043199 3)))
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

Solutions Acquisitions, LLC

(Name of the Limited Liability Company as it now appears on our records.)
 (A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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The Articles of Organization for this Limited Liability Company were filed on January 30, 2014 and assigned Florida document number L14000016759.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Solutions Manufacturing, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1938 Murrell Road

(Principal office address MUST BE A STREET ADDRESS)

Rockledge, FL 32955

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Neel Faldut

New Registered Office Address:

1938 Murrell Road

Enter Florida street address

Rockledge

City

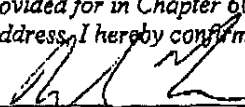
Florida

32955

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, I hereby confirm that the limited liability company has been notified in writing of this change.


 If Changing Registered Agent, Signature of New Registered Agent

(((H14000043199 3)))

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)Dated February 21, 2014

Signature of a member or authorized representative of a member

Vijaykumar Faldu

Typed or printed name of signer

Page 3 of 3

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