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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

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

mail	Address:	 	 

## **Foreign Limited Liability Company** Fenix Solutions, LLC

Certificate of Status	0
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K. SALY

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JAN-3-1-2025-

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

ГХ	name adopted for the purpose of transacting business in Florida	93-3471041		
(Jurisdiction under the law of v	hich foreign limited liability company is organized)	3(FEI numb	cr. il applicable i	
	(Date first transacted business in Florida, if prior to regis (See sections 605-0904 & 605-0905, F.S. to determine p	Stration, E	<del></del>	
15995 N Barkers	Landing Rd	6. (Mailing Address)	ding Rd	
Suite 330	<del></del>	(Mailing Address)  Suite 330		
Houston, TX 77079		Houston, TX 77079	20	
ame and street addre	ss of Florida registered agent: (P.O. Box N	OT acceptable)	5 JAN 30 PN 5: 22 LUANASAR FI SAN	
Name:	Northwest Registered Agent LL	<u>C</u>	PI	
Office Address:	7901 4TH ST N STE 300	<u> </u>	5: 22	
	ST. PETERSBURG	33702 , Florida	•	
	(City)	(Zin code)		

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
■Manager	Name: Aramburo, Fernando	<b>≣</b> Manager	Name: Aramburo, Rita	
□Member	Address:	□Member	Address:	
□Authorized 15995 N Barkers Landing Rd. Ste 330		□Authorized	15995 N Barkers Landing Rd. Ste 330	
Person	Houston, TX 77079	Person	Houston, TX 77079	
□Other	Other	□Other	Other	
■Manager	Name: Layton, Ricardo	□Munager	Name:	
□Member	Address:	□Member	Name:  Address: E T	
□Authorized	15995 N Barkers Landing Rd. Ste 330	□ Authorized	是 是 三	
Person	Houston, TX 77079	Person	23. O T	
□()ther	Other	□Other		
∐Manager	Name:	⊔Manager	Name:	
⊞Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	Other	

<u>Important Notice:</u> Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

Signature of an authorized person

Nat Smith

Typed or printed name of signee

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Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

## Office of the Secretary of State

## Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Fenix Solutions, LLC (file number 805223944), a Domestic Limited Liability Company (LLC), was filed in this office on September 11, 2023.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 28, 2025.



gave Melson

Jane Nelson Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 1447648210003