

2025 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000116335

Entity Name: HANDEX CONSULTING & REMEDIATION, LLC**Current Principal Place of Business:**2211 LEE RD
SUITE 110
WINTER PARK, FL 32789**Current Mailing Address:**2211 LEE RD
SUITE 110
WINTER PARK, FL 32789 US**FEI Number:** 20-3908055**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** STEPHANIE MILNES

07/09/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MEMBER
Name	FADELEY, BRETT
Address	2211 LEE RD SUITE 110
City-State-Zip:	WINTER PARK FL 32789

Title	MEMBER
Name	FOREMAN, STEPHEN
Address	2211 LEE RD SUITE 110
City-State-Zip:	WINTER PARK FL 32789

Title	MEMBER
Name	FOREMAN, DOUGLAS
Address	2211 LEE RD SUITE 110
City-State-Zip:	WINTER PARK FL 32789

Title	MEMBER
Name	SHOULDERS, ANDY
Address	2211 LEE RD SUITE 110
City-State-Zip:	WINTER PARK FL 32789

Title	CONTROLLER
Name	ARRUFAT, ROSA
Address	2211 LEE RD SUITE 110
City-State-Zip:	WINTER PARK FL 32789

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDY SHOULDERS

MEMBER

07/09/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date