

L21000496023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

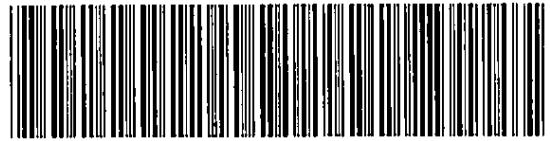
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

wrong form

Office Use Only



000403502900

03/07/23--01031--007 **49.75

FILED
2023 MAY 22 PM 12:02
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA
COUNTY OF SOUTHERN FLORIDA

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2023

MARIO ARELLANO
4484 S.W. 158 AVE.
MIAMI, FL 33185

SUBJECT: SONICVET, LLC
Ref. Number: L21000496023

We have received your document for SONICVET, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

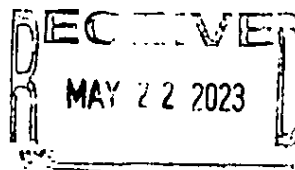
If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers
Regulatory Specialist III

Letter Number: 123A00010363

FILED

2023 MAY 22 PM 12:02



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SonicVet, 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:

Mario Arellano
Name of Person
Pet Echos, LLC.
Firm/Company
4484 SW 158 Avenue
Address
Miami, FL. 33185
City/State and Zip Code
info@petechos.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario Arellano at (786) 239-5703
Name of Person Area Code Daytime Telephone Number

2023 MAY 22 PM 12:02

FILED

Enclosed is a check for the following amount: *** see letter**

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Sonic Vet, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on 11/18/2021 and assigned
Florida document number L21000496023

This amendment is submitted to amend the following:

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

Pet Echos, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2023 MAY 22 PM 12:02
CLERK OF CIRCUIT COURT
JACKSONVILLE, FL

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:

New Registered Office Address:

Enter Florida street address

Florida

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, 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

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>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Mario Arellano</u>	<u>4484 S.W. 158 Ave.</u>	<input type="checkbox"/> Add
		<u>Miami, FL 33185</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>S</u>	<u>Diana Arellano</u>	<u>4484 SW 158 Ave.</u>	<input checked="" type="checkbox"/> Add
		<u>Miami, FL 33185</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2023 MAY 22 PM 12:02
CLERK OF DISTRICT COURT
MAY 22 2023


2023 MAY 22 PM 12:00
 2023 MAY 22 PM 12:00

FILED
2023 MAY 22 PM 12:02
FBI - NEW YORK

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 19, 2023



Signature of a member or authorized representative of a member

Mario Arellano

Typed or printed name of signee

Filing Fee: \$25.00