

124000112876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

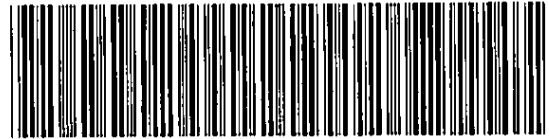
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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[Handwritten signature]
8/20/24

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2024 AUG 20 AM 6:32

SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Thony E/NA TRANS, 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 03/01/2024 and assigned Florida document number L24000118876

This amendment is submitted to amend the following:

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

Thony E/NA TRANS, 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)

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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SECRETARY OF STATE
TALLAHASSEE, FL
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Add
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STATEMENT OF STATE
TALLAHASSEE, FL

STATEMENT OF STATE
TALLAHASSEE, FL
2025 AUG 20 AM 6:32

(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 3/7/2024, _____

Thony Teau
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

THONY JEAN
Typed or printed name of signee

Filing Fee: \$25.00

PAH 000053385

K & K PET CARE, INC
1223 FAIRLAKE TRACE
APT 817
WESTON, FL 33326-2805
954-225-0202

July 15, 2024


To whom it may concern:

I KIRK G DELGADO, owner of K & K PET CARE, INC would like to state that I do not want to
reinstate with Document #

P20000003622 but would like to open new corporation with same name.

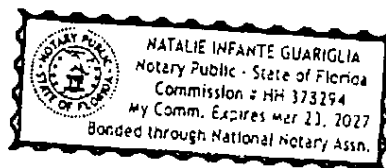
Thank you for your attention to this matter. If you have any questions, please don't hesitate to
contact me at the number above.

Sincerely,

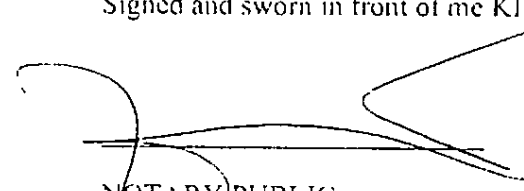

KIRK G DELGADO

STATE OF FLORIDA

BROWARD COUNTY



Signed and sworn in front of me KIRK G DELGADO on this 15th day of JULY, 2024.

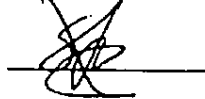

NOTARY PUBLIC

P24000053360

AFFIDAVIT TO RELEASE BUSINESS NAME

I, Stepan Salomatin, residing at 11661 River Run Pkwy, Commerce City, CO 80640, being duly sworn, depose and say:

1. I am the former owner/member of THE SALOMATIN GROUP LLC, a limited liability company that was voluntarily dissolved on July 25th in the state of Florida.
2. I am currently a resident of the state of Colorado, but this affidavit pertains to a business matter in the state of Florida.
3. The business name "THE SALOMATIN GROUP" is currently held by the state of Florida following the dissolution of the aforementioned LLC.
4. I request the release of the business name "THE SALOMATIN GROUP" so that I may register a new corporation under the same name in the state of Florida.
5. I affirm that I am the rightful owner of the dissolved LLC and have the authority to make this request.



Date :08/01/2024

Sworn to and subscribed before me this 1st day of August, 2024.



Notary Public

My commission expires: 02-09-2028

