

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G20000108191

Fictitious Name to be Registered: SALUTHIA

Mailing Address of Business: 2333 BRICKELL AVE
APT 1108
MIAMI, FL 33129

Florida County of Principal Place of Business: MULTIPLE

FEI Number: 47-4544585

FILED
Aug 21, 2020
Secretary of State

Owner(s) of Fictitious Name:

CONYPROCA LLC
2333 BRICKELL AVE, APT 1108
MIAMI, FL 33129
Florida Document Number: L15000118605
FEI Number: 47-4544585

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

LUIS EDUARDO ALFONZO

08/21/2020

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()