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SECRETARY OF STATE
SECRETARY OF STATE

D. SCOTT NOV 1 8 2016

COVER LETTER

Division of C			
	mercial LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Gary Brown		
		Name of Person	
	Zoo Commercial LLC		
		Firm/Company	
	7342 W. Commercial Bylo	d	
		Address	
	Lauderhill, FL 33319		
		City/State and Zip Code	1 <u>V</u> 1.
	zoohealthclub@zoocomme	rcialwest.com (to be used for future annual report notific	
For further information	concerning this matter, please c	·	
Gary Brown		954 882-6196 at ()	
Name	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zoo Commercial 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 01/13/2012 and assigned
Torida document number L12000006732
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
he 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)

3. If amending the registered agent and/or registered office address on our records, enter the name
3. If amending the registered agent and/or registered office address on our records, enter fire name of the ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Kazey Ellis	14716 Majestic Oak Dr. Charlotte, N.C.	07 Add
			Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
	·		Add
			16 Remove F1
			FILED NOV Lange PN 4: 17 RETAIL OF SPAIN ANASSEE, FLORIDA
			Remove
			Change
			Add
			□ Remove
			Change

			•		
Gary Brown is I	% Owner of Zoo Comm	mercial LLC			
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If the date inser	ner than the date of fi ed, the date must be specific rted in this block does n date on the Department	not meet the appl	icable statutory fi	more than 90 days after	ional) or filing.) Pursuant to 605 is date will not be liste
	s a delayed effective ter the record is file		not an effectiv	e time, at 12:01	a.m. on the earli
1	8/2016	,	 ?		

Page 3 of 3

Filing Fee: \$25.00