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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		
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16 JUL 20 AN IO: 42
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TALLAHASSEF TROOPS

S. PARRIE

COVER LETTER

TO: Registration Sec Division of Corp		•	
SUBJECT:	ZOO WORK	S LLC	
		ted Liability Company	
			7.
The enclosed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	JL 2
	F.	etar Dimitrov	2016 JUL 20 AH 11: 53
		Name of Person	(i) 1
	2	WORKS LLC Firm/Company	<u>, i</u>
	160 SU	12th Avenue, Su	ite 105
	Dec	Address The la Beach F City/State and Zip Code	Z 33442
		petar PKOTTONZOO.	
	E-mail address: (1	to befused for future annual report notific	cation)
For further information co	oncerning this matter, please ca	ıll:	
Peta Name of	Person	at (56/) 302 - Area Code Daytime	1720 Telephone Number
Enclosed is a check for the	e 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)
	NG ADDRESS: ution Section	STREET/COURIE Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

14



March 10, 2016

PET ARDIMITROV 751 PARK OF COMMERCE DRIVE, SUITE 128 BOCA RATON, FL 33487

SUBJECT: ZOOWORKS LLC Ref. Number: L13000082215

We have received your document for ZOOWORKS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L15000116144.

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) 245-6051.

Jenna D Harris Regulatory Specialist II

≱s

Letter Number: 516A00004943

16 JUL 20 AH 10: 4:

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
	The state of the s		□ Add
			□ Remove
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	, if other than the date of filing: (option e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after f	
	te inserted in this block does not meet the applicable statutory filing requirements, this excive date on the Department of State's records.	date will not be listed as
record spe The 90th d	ecifies a delayed effective date, but not an effective time, at 12:01 a. lay after the record is filed.	m. on the earlier o
ited	July 18th, 2016.	16. SEC
	PD, -	JUL 2D
	Signature of a member or authorized representative of a member	SE NO
	01 0	POF SIL
	Petar Dimitrov Typed or printed name of signee	- CO

Page 3 of 3

Filing Fee: \$25.00