# P16000070213

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ZRide, Inc.	
DOCUMENT NUMBER: P16000070213	
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Michael Karsch	
Name of Contact Person	
Trunte of Connect Ferson	
Rice Pugatch Robinson Storfer & Cohen, PLLC	•
Firm/Company	ก
	j
101 NE Third Avenue, Suite 1800	
Address S S	
Thurst of the second of the se	
Fort Lauderdale, FL 33301	
City/State and Zip Code	
mkarsch@rprslaw.com	
E-mail address: (to be used for future annual report notification)	
15-mail address. (to be dised for factore annual report normeditory	
For further information concerning this matter, please call:	
Michael Karsch At ()	
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& Certificate of Status \$\Bigcup \\$Additional copy is enclosed) \$\Bigcup \\$43.75 Filing Fee \& Certified Copy (Additional copy is enclosed) \$\Bigcup \\$52.50 Filing Fee, Certified copy (Certified Copy (Additional copy is enclosed)	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

#### ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST:	The name of the corporation is: ZRide, LLC			
SECOND:	The document number of the corporation (if known) is P16000070213			
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution			
	filed with the Florida Department of State is   Note: If the date inserted in this block does not meet the applicable statutory filing a not be listed as the document's effective date on the Department of State's records.	requirements, this date will		
FOURTH:	The Revocation of Dissolution was authorized on			
FIFTH:	Adoption of Revocation of Dissolution (check one)			
	<ul> <li>The board of directors revoked the dissolution.</li> <li>The incorporators revoked the dissolution.</li> <li>The board of directors revoked the dissolution authorized by the sharevocation was permitted by action by the board of directors alone prauthorization.</li> <li>The shareholders revoked the dissolution and the number of votes catapproval.</li> <li>The shareholders revoked the dissolution by voting groups - the number of votes catapproval.</li> </ul>	ursuant to that		
	(Voting group)			
SIXTH:	A copy of the Articles of Dissolution is attached.  Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)  Evan Brovenick  (Typed or printed name of person signing)	FILED  2016 BEC 20 PH 12: 55  SECRETARY OF STATE ALL AHASSEE. FLARIS.		
	Vice President			
	(Title of person signing)			

### Sep 30, 2016 Secretary of State

#### ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

The name of the corporation as currently filed with the Florida Department of State:

ZRIDE, INC.

SECOND:

The document number of the corporation: P16000070213

THIRD:

The file date of the articles of incorporation: August 24, 2016

FOURTH:

None of the corporation's shares have been issued.

The corporation has not commenced business.

FIFTH:

No debt of the corporation remains unpaid.

SIXTH:

The net assets of the corporation remaining after winding up have been distributed to

the shareholders, if shares were issued.

SEVENTH:

A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: EVAN BROVENICK

DIRECTOR

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative