

m11000005878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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AUG-25 2014

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2014 AUG 22 PM 12 32

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rent Recover LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chris Jones

(Name of Person)

Rent Recover LLC

(Firm/Company)

220 Gerry Drive

(Address)

Wood Dale, IL 60191

(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Jones

(Name of Person)

at 866 389-4042
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2014 AUG 22 PM 12 32
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Rent Recover LLC

(Name of limited liability company)

Illinois

(Jurisdiction of its organization)

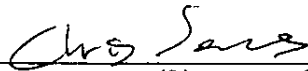
11/21/2011

(Date registered with Florida Department of State)

M11000005878

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Chris Jones

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
2014 AUG 22 PM 12:32
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DADE
FLORIDA