## M13000004168

(F	Requestor's Name)	
A)	address)	
(A	address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

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**S Warren** APR 17 2017

## **COVER LETTER**

Division of	n Section f Corporations	,		
SUBJECT:	Gratitube	LLC reign Limited Liability (		
	(Name of Fo	reign Limited Liability (	Company)	
Dear Sir or Madam:				
The enclosed withdr	rawal and fee(s) are submitte	ed for filing.		
Please return all cor	respondence concerning this	matter to the following	:	
J	(Name of Person)			
	(Name of Person)	,	•	
	Pratitube LLC (Firm/Company)			
	(Firm/Company)			
6030 Y	(Address)	ve, Unit 104		
Ta	mpa, FL 3361 (City/State and Zip Coo	<b>6</b> de)		
For further informat	ion concerning this matter, p	blease call:		
Jan	San Cares	at ( <b>%\3</b> (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	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

(Name of limited liability company)
(Name of limited liability company)
Montana
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M13000004168
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
Jason Caras
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
17 APR IL AN IO: 45
SECRETARY OF STATE
ANALYSEF FI ORIO