

MI6000007307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

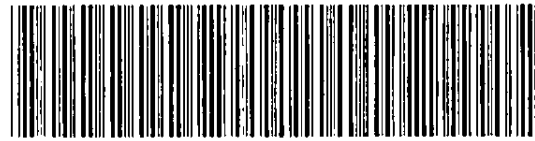
(Document Number)

Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Instructions to Filing Officer:

Office Use Only



400407899564

Withdrawal

FILED

2023 MAY -3 PM 12 29

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2023 MAY -3 PM 1:57



NOTARIES PUBLIC  
NOTARY PUBLIC

A. RAMSEY

MAY -4 2023

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 05/03/23**

**NAME: GET A RATE LLC**

**TYPE OF FILING: WITHDRAWAL**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Get A Rate 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:

Naumee Marenoski

\_\_\_\_\_  
(Name of Person)

Get A Rate LLC

\_\_\_\_\_  
(Firm/Company)

411 Hackensack Ave Suite 104

\_\_\_\_\_  
(Address)

Hackensack, NJ 07601

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Naumee Marenoski

201

393-0200

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

2023 MAY -3 PM 12 29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Get A Rate LLC

\_\_\_\_\_  
(Name of limited liability company)

New Jersey

\_\_\_\_\_  
(Jurisdiction of its organization)

09/14/2016

\_\_\_\_\_  
(Date registered with Florida Department of State)


M16000007307

\_\_\_\_\_  
(Florida Document Number)

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

  
\_\_\_\_\_  
(Signature of authorized representative)

Naumee Marenoski

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**