(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
,					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
J DENNIS					
MAY 21 2023					
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SECRETAR CORPOREALISM

COVER LETTER

TO:	TO: Registration Section Division of Corporations							
CHD IF/	REMODOLOGY, LLC							
SUBJEC	SUBJECT:(Name of Limited Liability Company)							
The encl	osed Articles of Dissolution and fee(s) are submitt	ed for filing.						
Please re	eturn all correspondence concerning this matter to	the following:						
	Tara Gidus Collingwood							
(Name of Person)								
	REMODOLOGY							
(Firm/Company)								
	1161 Banbury Trail							
(Address)								
	Maitland, FL 32751							
(City/State and Zip Code)								
For furth	er information concerning this matter, please call:							
	Tara Gidus Collingwood	321 287-8834 at ()						
	(Name of Person)	(Area Code & Daytime Telephone Number)						
Enclosed	is a check for the following amount:							
✓ \$25.00 Filing Fee and Certificate of Dissolution		S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)						
	MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section						
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building						

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A LIMITED LIABILITY COMPANY							
1.	The name of a limited liabil REMODOLOGY, LLC	lity company is					
2.	The Articles of Organizatio	n were filed on 1/27	7/2010	and assigned			
	document number L10000009666						
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)						
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the l copy 605.0707 on ba	imited liability company' ck cover letter).	s dissolution pursuant to section			
	Original founder of company died. Company has not been operating for many years.						
							
5.	If there are no members, ent	there are no members, enter the name and address of the person appointed to wind up the company's					
activities and affairs: Tara Gidus Collingwood							
1161 Banbury Trail							
		751					
6. list	Signature of an authorized p ed above to wind up the con	erson or if there are npany's activities and	no members, the signature Laffairs:	e of the person appointed and			
	Chaul In						
			Tara Gidus Collin	ngwod			