(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF CONRAD WILLKOMM, P.A.

Account Number : I20200000174 Phone : (239)262-5303 Fax Number : (239)262-6030

> LLC DISSOLUTION OR WITHDRAWAL MASTAG, LLC

Certificate of Status	0
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COVER LETTER

TO:	Registration Section Division of Corporations					
: CHOIC	MASTAG, LLC					
SUBJECT:(Name of Limited Liability Company)						
	closed Articles of Dissolution and fcc(s) are submit return all correspondence concerning this matter to	_				
	Conrad Willkomm					
	(Nune of Person)					
	Law Office of Conrad Willkomm, P.A. (Firm/Company)					
	(Firm/Company)					
	3201 Tamiami Trail N, 2nd Floor					
	(Address)					
	Naples, Florida 34103					
	(City/Sta	ite and Zip Code)				
For furt	her information concerning this matter, please call	:				
	Conrad Willkomm, Esq.	239	262-5303			
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed	I is a check for the following amount:					
■ \$25.00 Filing Fee and Certificate of Dissolution		☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	Mailing Address:	Street Addres				
	Registration Section		Registration Section			
	Division of Corporations P.O. Box 6327					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability co	ompany is	
2.	The Articles of Organization wer	re filed on <u>June 26, 2023</u>	and assigned
	document number L23000306147	· · · · · · · · · · · · · · · · · · ·	
3.	(effective date of Note: If the date inserted in this bl	ssolution if not effective on the date cannot be prior to or more than 90 days later lock does not meet the applicable statute date on the Department of State's record	than date document is received for filing) ory filing requirements, this date will not be
4.	A description of occurrence that 605,0707, Florida Statutes, (copy	resulted in the limited liability comp 605.0707 on back cover letter).	pany's dissolution pursuant to section
	Voluntary closed. Winding up of co-	mpany.	
			2021 DEC
			9
5.	If there are no members, enter the activities and affairs:	e name and address of the person ap	pointed to wind up the company
6. ab	Signature of an authorized person ove to wind up the company's act	n or if there are no members, the signification affairs:	nature of the person appointed and listed
10	HK DOMINIC	Ajith K. Domin	
	Signature		Printed Name

FILING FEE: \$25.00