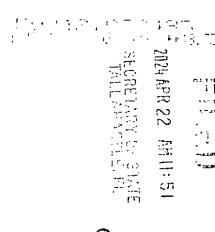
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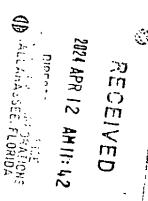
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COVER LETTER

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P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations
SUBJECT: NORTH FLORIDA INVESTIGATIVE SURVICES, INC
DOCUMENT NUMBER: <u>PO1000093079</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person)
NORTH FLORIDA INVESTIGATIVE SERVICES INC (Firm/Company)
(Firm/Company) 2465 ARVAH BRANCH BLVD (Address) (Address) (City/State and Zip Code) (City/State and Zip Code)
TALLAMASSEE FC 32309 FF 5 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (450) 545-5705 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	NORTH FLORIDA INVESTIGATIVE SERVICOS, INC.
SECOND:	The document number of the corporation (if known): PO1000093079
THIRD:	The date dissolution was authorized: $04/15/2024$
	Effective date of dissolution <u>if applicable</u> : (no more than 90 days after dissolution file date) 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.
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	TERRY H_ MEEK (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35