105000/67961

(Requestor's Name) (Address)	800112567918
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	12/03/0701004004 **35. 00
(Document Number) Certified Copies Certificates of Status	VD/W M
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 26, 2007

Valarie Kandel Veil Investigations, Inc. 9245 Gulfstream Blvd. Englewood, FL 34224

SUBJECT: VEIL INVESTIGATIONS, INC.

Ref. Number: P05000167961

We have received your document for VEIL INVESTIGATIONS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

Please return-a-copy-of-this-letter_along=with-your-document-to-ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 607A00067136

Valaire Kandel

ARTICLES OF DISSOLUTION FILED
Pursuant to section 607.1401, 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: VEIL INVEST/GATIONS, INC.
SECOND: The document number of the corporation (if known): P05000167961
THIRD: The file date of the articles of incorporation: <u>2/28/05</u> Effective date (
FOURTH: (CHECK AT LEAST ONE BOX)
None of the corporation's shares have been issued.
The corporation has not commenced business.
FIFTH: No debt of the corporation remains unpaid.
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH: Adoption of Dissolution (CHECK ONE)
A majority of the incorporators authorized the dissolution.
A majority of the directors authorized the dissolution.
Signature: (By a director, president or other officer of 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.) (Typed or printed name of person signing) (Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: VEIL INVESTIGATIONS JAC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim: VOLUNTARY DISSOLOTION
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
9245 GULFSTREAM BLVD
ENGLEWOOD, FZ 34224
881 4 Street, Englawood F2 3420-
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
VALARIE C. KANDEZ Salarie (Kandal)
Drinted Name of the Person Filing