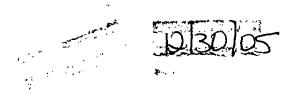
J07803

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Special Instructions to	Filing Officer:	
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BOR 12/7/05

COVER LETTER

Division of Corporations		
SUBJECT: Descolution		
DOCUMENT NUMBER: J07803		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Elizabeth Schweid (Name of Contact Person)		
Sunshine and Sandcastle, Inc. (Firm/Company)	<u>ン</u>	
1022 Derfleery Road (Address)		
Palm Bay II. 32909 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Elizabeth Schweiel at (321) 725-6714 (Name of Contact Person) (Area Code & Daytime Telephone Number	er)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times\$\$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\		
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section		
Division of Corporations Amendment Section Division of Corporations		
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF DISSOLUTION

Pursuant to sof dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on: 05 DEC -2 PM 1: 12		
FIRST:	The name of the corporation as currently filed with the Florida Department of State FLORIDA Sunshine and Sandcastles Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 12-30-05 (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	Dissolution was approved by of the shareholders through voting groups.		
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
5	Signature: Signature: School S		
	ELIZABETH SCHWIND (Typed or printed name of person signing)		
	DIRECTOR (Title of person signing)		

Filing Fee: \$35