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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

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AND 155 (10/09

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: SUNSEA SECURITIES CORP.	
DOCUMENT NUMBER: K90031	
The enclosed Articles of Dissolution and fee are submit	tted for filing.
Please return all correspondence concerning this matter t	to the following:
ALAN P. RAINES	
(Name of Contact Person	on)
RAINES & FISCHER LLP	
(Firm/Company)	
555 5TH AVENUE, 9TH FLOOR	-
(Address)	
NEW YORK, NY 10017	
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	all:
ALAN P. RAINES at (2	
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Fi Certificate of Status Certified (Additiona enclosed)	l copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

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 o	f State:	
	SUNSEA SECURITIES CORP.		
SECOND:	• , , , , , , , , , , , , , , , , , , ,		<u> </u>
THIRD:	The date dissolution was authorized: 8/31/09		_
	Effective date of dissolution if applicable: 8/31/09 (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 was sufficient for approval.	for dissolu	tion
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	- * 200	09 SEP -	SECRE TA
	Signature: (By a director president or other officer - if directors or officers have not been selected, by	6	SSE
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	h th Hd	OF STATI
	ALAN P. RAINES	ယ	D _E
	(Typed or printed name of person signing)		
	SECRETARY		
	(Title of person signing)		

Filing Fee: \$35