Pos000006952

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SEPARTASSEE FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Closed Business	
DOCUMENT NUMBER: P05000069652	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Meirau Levi	
(Name of Contact Person)	
Dead Sea INC. (Firm/Company)	
(Firm/Company)	
2108 SE 2ND ST. (Address)	
(Address)	
(City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Meirau Levi at (239) 464-9093 (Name of Contact Person) (Area Code & Daytime Telephone Num	
(Name of Contact Person) (Area Code & Daytime Telephone Num	ber)
Enclosed is a check for the following amount:	
35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	
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

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Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following IALLAHASSEE, FLORIDA

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	Degol Sea INC	
SECOND:	The document number of the corporation (if known):_PoS0000 69652_	
THIRD:	The file date of the articles of incorporation:	
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 - 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.)		
(Typed or printed name of person signing)		
	President (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. Dead Sea INC. Name of Corporation:_ Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: The Business is closed as of 12/31/2005 Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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.