

LOS000072616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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LOS-72616



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08 JAN 24 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Thomas JAN 24 2008

LAW OFFICES

DAVIS, SCHNITKER, REEVES & BROWNING, P. A.

W. T. DAVIS (1901-1988)
CLAY A. SCHNITKER
GEORGE T. REEVES**
E. BAILEY BROWNING III

CERTIFIED LEGAL ASSISTANT
ANNETTE M. SOWELL

*BOARD CERTIFIED CITY, COUNTY
AND LOCAL GOVERNMENT LAWYER
*ALSO ADMITTED IN GEORGIA

POST OFFICE DRAWER 652
MADISON, FLORIDA 32341

PHYSICAL ADDRESS
519 WEST BASE STREET
MADISON, FLORIDA 32340

TELEPHONE
(850) 973-4188
TELECOPIER
(850) 973-8584

January 9, 2008

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

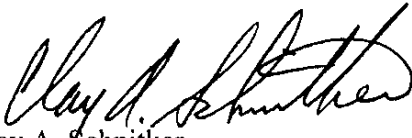
RE: WKRB, LLC
Documents No. L05000072616

Dear Sirs:

Enclosed you will please find a Resignation of Member, Managing Member or Member from Florida or Foreign Limited Liability Company. Also enclosed is our checks in the amount of \$25.00 to cover the cost of filing, for the above referenced limited liability company.

If anything further is needed please do not hesitate to contact me.

Sincerely,
Davis, Schnitker, Reeves & Browning, P.A.


Clay A. Schnitker
For the Firm

CAS:jab
Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WKRB, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

GREGORY G. BOREE

(Contact Person)

MOORES VALLEY, LLC

(Firm/Company)

9428 BAYMEADOWS ROAD, SUITE 230

(Address)

JACKSONVILLE, FLORIDA 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

GREGORY G. BOREE

(Name of Contact Person)

at (904) 996-8337

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:



\$25 Filing Fee



\$55 Filing Fee &

Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

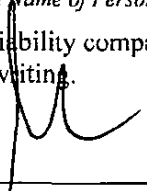
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: WKRBB, LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L05000072616

4. I, THE ARCHER GROUP, LLC, hereby resign as a MANAGER AND MEMBER
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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TALLAHASSEE, FLORIDA

RESIGNATION OF MANAGER

THE ARCHER GROUP, LLC, hereby resigns as Manager of WKRB, LLC, a Florida limited liability company. We hereby affirm that no money or other compensation is due to us from WKRB, LLC, for acting as Manager of WKRB, LLC.

EXECUTED this 4th day of January, 2008, by THE ARCHER GROUP, LLC.

THE ARCHER GROUP, LLC

By: *Nikolaos T. Kavalieros*
NIKOLAOS T. KAVALIEROS, as Manager
and Director of The Archer Group, LLC

STATE OF FLORIDA
COUNTY OF Duval

The foregoing instrument was acknowledged before me this 4th day of January, 2008, by NIKOLAOS T. KAVALIEROS, as Manager and Director of and on behalf of THE ARCHER GROUP, LLC, who is personally known to me or who has produced _____ as identification.

Deanna Hayes
Notary Public

Commission # DD420392

My Commission Expires: 4/19/09



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TALLAHASSEE, FLORIDA