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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2007

BONNIE MULLEE P.O. BOX 420666 SUMMERLAND KEY, FL 33042

SUBJECT: WINGS PUBLISHING, L.L.C.

Ref. Number: L05000101906

We have received your document for WINGS PUBLISHING, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Document Specialist Letter Number: 807A000380605

COVER LETTER

✓ \$35.00 Filing Fee	\$43.75 Filing Fee & Certified Copy			
Enclosed is a check for the following amount:				
Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Clifton Building 2661 Executive Center Circle	P.O. Box 6327			
Division of Corporations	Division of Corporations			
Registration Section	Registration Section			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
(Name of Person) (Are	ea Code & Daytime Telephone Number)			
Bonnie M. Mullee.				
Daniela M. M. H.	NE 870.0070	E D	∞	
For further information concerning this matter, p	lease call:)F STATE ,FLORID/	PH I2: 38	
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(City/State and Zip Code)		EΘ		
(City/State and Zip Code)	· · · · · · · · · · · · · · · ·	ETARY OF HASSEE,	20	
Summerland Key, Florida 33042		RET	2007 JUN 20	77
(Address)		ALL SEC	[00]	
P.O. Box 420666; 518 Airport Drive S.	····	7.	2	
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·			
Wings Publishing, L.L.C.				
(Name of Person)				
Bonnie M. Mullee				
Please return all correspondence concerning this	matter to the following:			
.,				
The enclosed Statement of Change of Registered fee(s) are submitted for filing.	Agent/Registered Office for Alien Business Org	ganization	and	
Dear Sir or Madam:				
	lien Business Organization)			
SUBJECT: Wings Publishing, L.L.C.				
Division of Corporations .				
TO: Registration Section				

INHS23 (08/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: NIN65 PUBLISHIP LEC 2. The mailing address of the limited liability company is: P.O. Box 420666 Summer land key FL 33042 - 0666 10-14-2005 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: NATIONAL REGISTIES AGENTS, INC Name 2731 EXECUTIVE TARK Dr. Step Address WESTON City, State and Zip 6. The name and address of the new registered agent and/or office: Bonnel and Ky FL 33042 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida limited and the business office of the registered agent will be identical. Or, in the case of a Florida limited and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of new registered agent, if applicable: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of south of the production. (Registered agent accepting appointment) (Registered agent accepting appointment) (Registered agent accepting appointment) (Registered agent accepting appointment)		J.				
Summer land Key, FL 33042-0666 10-14-2005 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: NATIONAL REGISTERED AGENTS JOL Name 2731 EXECUTIVE TORK Dr. STE 4 Address Weston FL 33331 City, State and Zip 6. The name and address of the new registered agent and/or office: Bonnie M. Molle State State State of Florida Street address (P.O. Box NOT acceptable) Summer and La FL 33042 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of new registered agent, if applicable: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 1008. Florida Statutes.	1. The name of the limit	ed liability company is:	WINGS PUBLISHIN	36, LLC		<u></u> .
Summer land Key, FL 33042-0666 10-14-2005 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: NATIONAL REGISTERED AGENTS JOL Name 2731 EXECUTIVE TORK Dr. STE 4 Address Weston FL 33331 City, State and Zip 6. The name and address of the new registered agent and/or office: Bonnie M. Molle State State State of Florida Street address (P.O. Box NOT acceptable) Summer and La FL 33042 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of new registered agent, if applicable: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 1008. Florida Statutes.	2. The mailing address of	f the limited liability con	npany is : <u>P.O. Box 4</u>	20666		
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6. The name and address of the new registered agent and/or office: Commercia Commerci		NATIONAL RE	GISTERED AGENTS,	INC		
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I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section UCB., Florida Statutes.	BONNIE Signature of new regist	M MOLLER ered agent, if applicable:		~ — ——	-	
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00