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(Requestor's Name) (Address) (Address)	800110097948
(City/State/Zip/Phone #)	10/04/0701011025 ++43.75
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	DT NOV -2 PH 1: 57 SECRETARY OF STATE TALLAHASSEE ELORIDA
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APPROVEL

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WNC Media Consultants, Inc.

DOCUMENT NUMBER: <u>P05 000 156 819</u>

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James W (Name of Contact Person) (Firm/ Company) Plum Hoad Weavervi City/ State and Zip Code)

For further information concerning this matter, please call:

at (828 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

□ \$35 Filing Fee

Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional is enclosed

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2007

JAMES METCALF 76 PLUM RD WEAVERVILLE, NC 28787

SUBJECT: WNC MEDIA CONSULTANTS, INC. Ref. Number: P05000156819

We have received your document for WNC MEDIA CONSULTANTS, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

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

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

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Letter Number: 407A00059493

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CEIVE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution OF Florida profit Corporation DOCUMENT NUMBER: P05000156819

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

(Name of Contact Person) at (561) 391.4141 x 213 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee\$43.75 Filing Fee & \$\$43.75 Filing Fee & \$\$52.50 Filing Fee,
Certificate of StatusCertificate of StatusCertified Copy
(Additional copy is
enclosed)Certificate of StatusCertified 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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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FIRST:	FIRST: The name of the corporation as currently filed with the Florida Department of State:	
	WNC Media Consultants, Inc.	
SECOND:	The document number of the corporation (if known): P05000156819	
THIRD:	The file date of the articles of incorporation: $\underline{11/29/2005}$	
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)	
	\square A majority of the directors authorized the dissolution. \square A majority of the directors authorized the dissolution. \square A majority of the directors authorized the dissolution. \square A majority of the directors authorized the dissolution.	
Sign	ature: <u>Audulation</u> (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.) <u>Fred DeFalco</u> (Typed or printed name of person signing) <u>President</u> (Title of Person Signing)	

Filing Fee: \$35