

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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**DISSOLUTION OR WITHDRAWAL
WLNY GP, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

C. LEWIS

AUG - 6 2013

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Corporate Filing Menu

EXAMINER
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

WLNY GP, INC. 2ND FAX
C/O WLNY-TV INC.
270 S. SERVICE ROAD, STE 55
MELVILLE, NY 11747

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE

SUBJECT: WLNY GP, INC.
REF: P05000163449

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document must state the date the dissolution was authorized.

Please fill in the EXACT date the dissolution was authorized in the third paragraph.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

FAX Aud. #: H13000171647
Letter Number: 213A00018603

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FBI TALLAHASSEE, FLORIDA

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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 of State:
WLNY GP, INC.

SECOND: The document number of the corporation (if known): P05000163449

THIRD: The date dissolution was authorized: 08/01/2013

Effective date of dissolution if applicable: _____
(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 for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

10 Shares (100%)
(voting group)

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)

Peter Cavallaro

(Typed or printed name of person signing)

Secretary

(Title of person signing)

Filing Fee: \$35

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA