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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2010

JOHNNY YATES (2ND MAILING) NEW VISION MEDIA 6571 43RD ST N STE 1714 PINELLAS PARK, FL 33781

SUBJECT: NEW VISION MEDIA, INC.

Ref. Number: 500161687545

We have received your document for NEW VISION MEDIA, INC. 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 can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 509A00033129

Johnny Yates 6444 31 Ter. N. St. Pete. FL 33710 727-504-9638 www.sunbiz.org





October 16, 2009

JOHNNY YATES NEW VISION MEDIA 6444 31 TER N ST PETERSBURG, FL 33710

SUBJECT: NEW VISION MEDIA Ref. Number: 500161687545

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

Please indicate the exact name of your corporation on your document and document number in the space provided on your document.

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) 245-6892.

Letter Number: 509A00033129

Tina Roberts Regulatory Specialist II

Division of Cornerations - P.O. BOX 6327 - Tallahassee Florida 32314

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Company Clased
DOCUMENT NUMBER: 26-1948541
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Johnny Yater (Name of Contact Person)
Vew Usion Media (Firm/Company)
6444 31 Ter. N. (Address)
St. Pete. FL 33710
(City/State and Zip Code)
For further information concerning this matter, please call:
Tohnny Yater at (727) SOY-9638 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Z\$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 MAILING ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

The company New Vision medical, Inc. has closed as of September 2009.

The business never opened. The FEIN number is 26 - 1948541

Business address is 6571 43 Street No Ste 1714 Pinellas Park, Fl 33781
Old Phone number is 727-527-7919

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	New Vision Modia Associates The
SECOND:	The document number of the corporation (if known).
THIRD:	The file date of the articles of incorporation: $9-26-07$
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	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.
Sign	ature: (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 10 war
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by against this corporation as			ned below for res	solution of payment of	ınknown claims
This "Notice of Corporate	<i>Dissolution</i> " is o	optional and is	not required wh		ssolution.
Name of Corporation:	New	Vision	Media	Inc.	- 14
Date of dissolution will be specified in the Articles of		olution is filed	with the Depart	ment of State or as	
Description of information	that must be inc	luded in a clai	m:		
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		/OL:			
Mailing address where claim	ms can be sent:		•	·	
	Johnn	y Ya	tes	1.	
	6444	31	TEC. N	1.	
	St. (rete.		710	_
					_
A claim against the above within 4 years after the fili			red unless a proc	eeding to enforce the cl	aim is commenced
				. /	/
Jol	nnny Ya	ter		John C	/da
Printed Na	ıme of the Person Fi	iling		Signature of the Person,	Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00