

P95000065329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

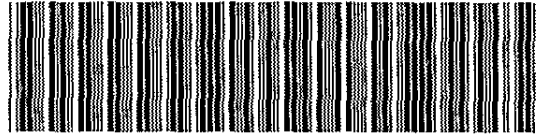
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps shirley
Diss



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 20, 2006

HUNTLEY BELLAMY
ION MEDIA NETWORKS
601 CLEARWATER PARK RD
WEST PALM BEACH, FL 33401-6233

SUBJECT: PAXSON NEW YORK LICENSE, INC.
Ref. Number: P95000065329

We have received your document for PAXSON NEW YORK LICENSE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your document is being returned as requested.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith
Document Specialist

Letter Number: 106A00046372

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAXSON NEW YORK LICENSE, INC.

DOCUMENT NUMBER: P95000065329

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

Please return all correspondence concerning this matter to the following:

Huntley Bellamy

(Name of Contact Person)

ION Media Networks

(Firm/Company)

601 Clearwater Park Road

(Address)

West Palm Beach, FL 33401-6233

(City/State and Zip Code)

For further information concerning this matter, please call:

Huntley Bellamy

(Name of Contact Person)

at (561) 682-4131

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified 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 607.1403, 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:

PAXSON NEW YORK LICENSE, INC.

SECOND: The document number of the corporation (if known): P95000065329

THIRD: The date dissolution was authorized: 07/17/06

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

(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)

William L. Watson

(Typed or printed name of person signing)

Secretary

(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE