



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000185089** | Submit Date: **02/22/2022** | Lead Call Sign: **WLLJ-LP** | FRN: **0030838379**  
 Service: **Low Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **02/22/2022** |  
 Filing Status: **Active**

### General Information

Section	Question	Response
<b>Attachments</b>	Are attachments (other than associated schedules) being filed with this application?	No

### Applicant Information

#### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>GET A LIFE FOUNDATION, INC.</b> Doing Business As: GET A LIFE FOUNDATION, INC.	Teresa Lucas 2825 GLEASON PARKWAY CAPE CORAL, FL 33914 United States	+1 (239) 540-1290	teresa@GETALIFE7.ORG	Not-for-Profit

### Contact Representatives Information (1)

Contact Name	Address	Phone	Email	Contact Type
<b>DONALD MARTIN</b> <i>Attorney</i> DONALD E. MARTIN, P. C.	Donald Martin PO Box 8433 Falls Church, VA 22041 United States	+1 (703) 642-2344	DEMPC@PRODIGY.NET	Legal Representative

### Consummation Notification Details

#### Details

Date of Consummation	FRN of Licensee Post-consummation
2022-02-21	0030838379

#### Consume the Following Authorizations:

Select all the authorizations in the table below that will **not be consummated**

Call Sign	Facility ID	File Number	Will Not Consume
WLLJ-LP	194145	0000143948	

### Certification

Section	Question	Response
<b>Authorized Party to Sign</b>	WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503).	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>Teresa Lucas</b> <i>Treasurer</i>  02/22/2022

**Attachments**

Information not provided.