



# (REFERENCE COPY - Not for submission)

## Notification of Consummation

File Number: **0000164721** | Submit Date: **10/25/2021** | Lead Call Sign: **W256CD** | FRN: **0006157721**Service: **FM Translator** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **10/26/2021**Filing Status: **Active**

### General Information

| Section     | Question   | Response |
|-------------|--|----------|
| Attachments | 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>RED MOUNTAIN VENTURES, LLC</b><br>Doing Business As: RED MOUNTAIN VENTURES, LLC | POST OFFICE<br>BOX 59852<br>BIRMINGHAM,<br>AL 35259<br>United States | +1 (205)<br>266-3740 | REYNOLDSLYLE@YMAIL.<br>COM | Limited Liability<br>Company |

### Contact Representatives Information (1)

| Contact Name   | Address  | Phone                 | Email                         | Contact Type            |
|--|--|-----------------------|-------------------------------|-------------------------|
| <b>Scott Woodworth</b><br>Edinger Associates<br>PLLC | 1725 I Street, NW<br>Suite 300<br>Washington, DC<br>20006<br>United States | +1 (202) 747-<br>1694 | swoodworth@edingerlaw.<br>net | Legal<br>Representative |

### Consummation Notification Details

#### Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2021-10-22           | 0004995288                        |

#### 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 |
|-----------|-------------|-------------|------------------|
| W256CD    | 153894      | 0000150239  |                  |

### Certification

| Section                  | Question  | Response  |
|--------------------------|---|---|
| Authorized Party to Sign | 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>Lyle Reynolds</b><br><i>Member</i><br><br>10/25/2021 |

**Attachments**

Information not provided.