

L1000 0061271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

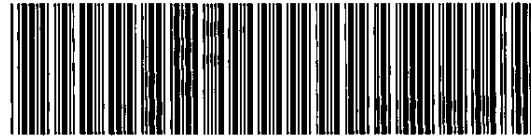
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2 pages

WOOD INSURANCE AGENCY, LLC
101 WILLIAMS AVE
PORT ST JOE, FL 32456
OFFICE 850-229-6514

EMAIL billwood@fairpoint.net

FAX 850-227-3553

FAX 850-245-6897


PLEASE ADD TIN 27-2817512 TO L10000061271

CITIZENS INSURANCE WILL NOT TRANSFER MY BOOK TO NEW
COMPANY WITHOUT THE TIN NUMBER, THEY HAVE PUT ME
ON A TIME LIMIT TO GET THIS CHANGE.

YOUR HELP IS GREATLEY NEEDED AND APPRECIATED.

THANK YOU, BILL

8/6

 **Department of the Treasury**
Internal Revenue Service
Ogden, UT 84201

In reply refer to: 0449155477
Aug 02, 2010 LTR 147C
27-2817512

WOOD INSURANCE AGENCY LLC
WILLIAM J WOOD JR SOLE MBR
101 WILLIAMS AVE
PORT ST JOE FL 32456-1866 018

Taxpayer Identification Number: 27-2817512

Form(s):

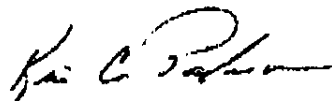
Dear Taxpayer:

This letter is in response to your telephone inquiry of August 2nd, 2010.

Your Employer Identification Number (EIN) is 27-2817512. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence documents.

If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 10:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely,



KRIS C PALMER
0144675
Customer Service Representative