## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/Otate/Zip/i Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
A. LUNT
OCT 19 2010
EXAMINER

Office Use Only



ATTN: Agnes

Please accept this letter as acknowledgement that I will not renew Tommy Gunn Entertainment, Inc. I am going to leave it dissolved.

Thank You

**Tommy Strada** 

600186815226

RECEIVED

10 OCT 19 PH 2: 40
SECRETARY OF STATE
ALL AHASSEF EL GREDA

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