

L11000125066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

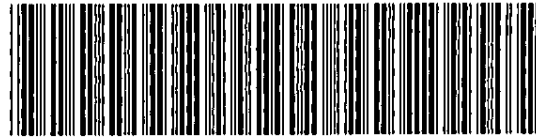
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/2/11

ATTN: Neysa

Fax: 850-245-6030

We have no intention of re-instating
the entity "Baker Wallcovering, Inc."
therefore, releasing the name for use
to another entity.

Judith H. Baker
VP
Baker Wallcovering, Inc.

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