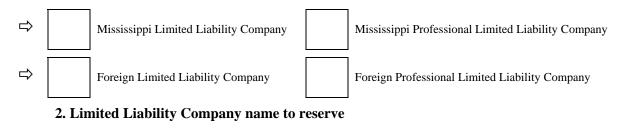
OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1633 Mississippi LLC Application for Name Reservation

1. Type of Corporation



3. Name of applicant

4. Address

⇔														
⇔	City,	State, ZIP5, ZIP4	4										-	
	5. Da	ited												
⇔														
	By:	Signature					((Please k	eep	wri	ting w	ithin b	locks))
		Printed Name												