

## State of Utah DEPARTMENT OF COMMERCE Division of Corporations & Commercial Code Central Filing System CFS - 2 Request for Information

1896 CIS - 2 Request for information	,11				
A. EMAIL CONTACT (optional)					
B. SEND ACKNOWLEDGEMENT TO: (name and address)					
			THE	ABOVE SPACE IS FOR FILI	NG USE ONLY
DEBTOR'S NAME - If section 1a. and 1b. are both filled out the     la. ORGANIZATION NAME:	ne filing will be rejec	eted.			
ia. OKGANIZATION NAIVIE.					
OR 1b. INDIVIDUAL'S SURNAME:	FIRST NAME:		MIDDLE NA	AME:	SUFFIX:
3d. SSN or TAX ID#:					
2. INFORMATION OPTIONS: Relating to CFS filings and other	notices on file in the	e filing office that in	nclude the	Debtor name identified in it	tem 1:
2a. SEARCH RESPONSE CERTIFIED N	ION-CERTIFIED				
2b. COPY REQUEST CERTIFIED N	ION-CERTIFIED				
2c. SPECIFIED COPIES ONLY CERTIFIED N	ION-CERTIFIED				
Filing Number Date of Record	Type of Record an		d Additional Identifying Information		
3. DELIVERY INSTRUCTIONS: The request will be completed	and mailed to the ad	dress shown in iten	n B unless	otherwise instructed here:	
3a. Mail to other address than what is listed in item B:					
ORGANIZATION NAME:					
OR INDIVIDUAL'S SURNAME:	FIRST NAME:		MIDDLE NA	AME:	SUFFIX:
MAILING ADDRESS:	CITY:		S	STATE:	POSTAL CODE:
3b. Email to other address than what is listed in item A (non-certif	fied copies only):				
EMAIL ADDRESS:					
3c. Pick up:					
Division (	of Corporations an 160 East 300 Salt Lake City, Ut	South	de		
Mailing/Faxing Information: corporations.utah.gov/co	ntactus.html	Divisi	on's Webs	ite: www.corporations.ut	ah.gov