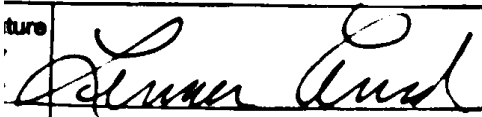


Date Produced: 04/14/2014


WEST VIRGINIA SECRETARY OF STATE:

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Signature of Recipient :

Delivery Section	
Signature	
Printed Name	Lenore Lund

Address of Recipient :

Address	
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