SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature A. Signature Agent Addresses B. Received by (Printed Name) C. Date of Delivery C. L. C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 19
A2Z Enterprises, LLC Dan Morrison, Registered	Agent
Dan Morrison, Registered 408 E. Scribner Road	Service Type
Dan Morrison, Registered	Service Type Certified Mall® □ Priority Mall Express™
Dan Morrison, Registered 408 E. Scribner Road	Service Type Certified Mall® □ Priority Mall Express™ □ Registered □ Return Receipt for Merchandise
Dan Morrison, Registered 408 E. Scribner Road Port Angeles, WA 98362	Service Type Certified Mail® □ Priority Mail Express™ □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery