

Attorney: Russell Murelock
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1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; text-align: center;"> Mr. Nathan Buchanan Jireh Resources, LLC 2526 East 7th Street, Suite A Tulsa, OK 74136 </div>	B. Received by (Printed Name) <i>LARRY WOODS</i>	C. Date of Delivery <i>3-7-12</i>
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, February 2004	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
Domestic Return Receipt	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <div style="text-align: center; font-size: 1.2em;"> 7005 1820 0003 7457 2346 </div>	
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