

Cancellation of Registration

REQUEST FOR CANCELLATION OF REGISTRATION

TO: Washington Utilities & Transportation Commission
Attention: Telecommunications Section
P.O. Box 47250
Olympia, WA 98504-7250
(Fax) 360-586-1150

Docket UT- _____
(Commission Use Only)

The undersigned, _____ APRIL PONE _____ does hereby
(Issuing Agent/Officer of Company)

request cancellation of _____ MIRACLE COMMUNICATIONS, INC. _____ registration
(Registered Company Name)

to operate as a telecommunications company doing business in the state of Washington.

Please include the following information:


Unified Business Identification (UBI) Number: _____ 601975624 _____

Company Contact Person: _____ APRIL PONE _____

Contact Telephone Number: _____ (805) 374-1712 _____

The undersigned certify that they have no existing customers and no outstanding prepaid calling services.

I understand that this request is not effective until acknowledged upon by the Commission.

Signature: _____  _____

Date: _____ 05/01/2017 _____