INTERNAL REVENUE SERVICE

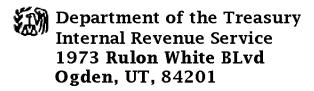


FAX TRANSMISSION Cover Sheet

Date: August 04, 2025	
To:	
Address/Organization:	
Fax Number: <u>(855) 591-0320</u>	Office Number:
From: Thompson Janalee M I	
From: Thompson Janalee M I	
From: Thompson Janalee M I Address/Organization:	
<u> </u>	

Subject: 147C_36.PDF

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In reply refer to: 0434615413 8/4/2025 LTR 147C

METAFICTION MEDIA PHILIP J MARQUEZ SOLE MBR 1250 N STATE COLLEGE BLVD ANAHEIM, CA 92806-1530-998

Employer Identification Number: 39-2767933

Dear Taxpayer:

Thank you for your inquiry of 8/4/2025.

Your Employer Identification Number (EIN) is 39-2767933. Please keep this letter in your permanent records. Enter your name and your EIN on all business federal tax forms and on related correspondence.

If you have any questions regarding this letter, you can call 800-829-0115. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely, Mrs Thompson 1003875796 CSR