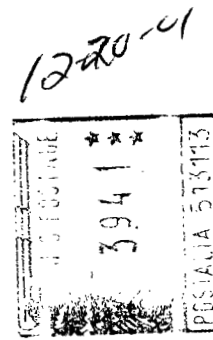
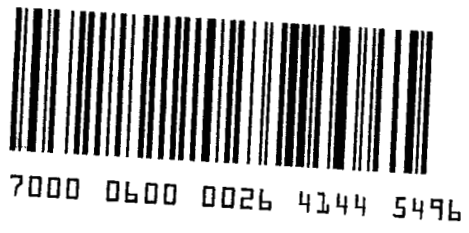


ORIGINAL

CERTIFIED MAIL

United States Post  
State Service  
Item is at:  
**Public Service Commission**  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



AvanaCom  
Regulatory Compliance Department  
1690 Chantilly Drive  
Atlanta GA 30324-3293

AVAN690 303243293 1301 08 12/17/01  
NOTIFY SENDER NEW ADDRESS  
: AVANA COM REGULATIONS  
PO BOX  
SAWRB SEVI GA 30609

**BOX CLOSED  
NO FORWARDING  
ORDER ON FILE**

30324-3293

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

AvanaCom  
Regulatory Compliance Department  
1690 Chantilly Drive  
Atlanta GA 30324-3293

4a. Article Number

011272-TX

- Certified
- Insured
- andise  COD

Only if requested

6. Signature: (Addressee or Agent)

X

**NO FORWARDING  
ORDER ON FILE  
BOX CLOSED**

Thank you for using Return Receipt Service.

DOCUMENT NUMBER - DATE

16112 DEC27

FPSC-COMMISSION CLERK

