RECEIVED-FPSC
05 JAN 26 PM 3:22
COMMISSION CLERK

040917-TI

ORIGINAL

SENDER: *COMPLETE THIS SECTION*

- 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.

1. Article Addressed to:

040917

Arctics
8405 N.W. 29th Street
Miami FL 33122-1924

-CO-

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service 7002 0860 0001 1758 5774

PS Form 3811, March 2001 Domestic Return Receipt 102595-01-M-1424

State of Florida
Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

RETURN TO

7002 0860 0001 1758 5774

047J82004132
$04.42⁰
12/27/2004
Mailed From 32399
US POSTAGE

RETURN TO SENDER
UNCLAIMED

Arctics
8405 N.W. 29th Street
Miami FL 33122-1924

WT
12/29

PSC-04-1277-CO-TI

32399/0885

CMP COM CTR ECR GCL OPC MMS RCA SCR SEC OTH

DOCUMENT NUMBER-DATE
00956 JAN 26 05
FPSC-COMMISSION CLERK