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CERTIFICATE TRANSFER

As current holder of Florida Public Service Commission Certificate Number, I have reviewed this application and join in the petitioner's request for a transfer of the certificate.
Print Name: Dill Mudnigue 2 Title: Street/Post Office Box: City: MIAMI, GANDENC, P. 33/69 State: Zip: 33/69 Telephone No.: Fax No.: E-Mail Address: Not talk. (om., /NC. Not. Not. No., /NC. Not. Not. Not. Not. Not. Not. Not. No
Signature: CeMedury Date: $\frac{10/4/20/2}{20}$