

RECEIVED - FPSC

14 MAY 29 AM 9:01

COMMISSION  
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to: <b>130180-WS</b> <b>DMS 05047-13 &amp; 06880-13</b></p> <p>MARTIN S FRIEDMAN ESQUIRE SUNDSTROM FRIEDMAN &amp; FUMERO LLP 766 N SUN DR STE 4030 LAKE MARY FL 32746</p>	<p>B. Received by (<i>Printed Name</i>) <b>Dana E. Rudolf</b></p> <p>C. Date of Delivery <b>5/19/14</b></p>
<p>2. Article Number (<i>Transfer from service label</i>)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>PS Form 3841, February 2004</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>
<p>7006 2760 0003 8795 1829</p>	