

RECEIVED-FPSC

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COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	A. Signature X FPL - JB <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: DR. TUDOR Document # 04471-14	B. Received by (Printed Name) 700 Universe Blvd	C. Date of Delivery
Jessica A. Cano, Principal Attorney Florida Power & Light Company 700 Universe Boulevard Juno Beach, Florida 33408-0420	D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, enter delivery address below) Juno Beach FL 33408	
2. Art (Tr) 7015 1520 0002 5520 2720	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input checked="" 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.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

