

RECEIVED-FPSC
2026 FEB 27 AM 9: 37

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ 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.	<p>A. Signature <input type="checkbox"/> Agent X <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Dkts 20240001-EI & 20240034-EI DNs 00728-2024 & 07505-2024</p> <p>Maria J. Moncada Florida Power & Light Company 700 Universe Boulevard Juno Beach, FL 33408-0420</p>	<p>B. Received by (Printed Name) FPL - JB C. Date of Delivery 2/26/26</p>
<p>9590 9402 6460 0346 0130 83</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No 700 Universe Blvd Juno Beach FL 33408</p>
<p>2. Article Number (Transfer from service label) 7020 1290 0000 7279 1685</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail (over \$500) <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>