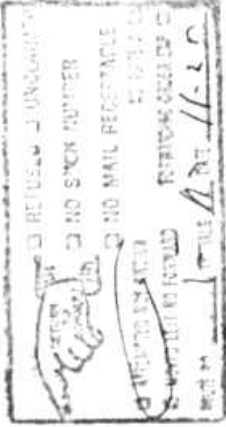


State of Florida

Public Service Commission

Fletcher Building, 101 East Games Street
Tallahassee, Florida 32399-0850



Handwritten: BUSINESS

CERTIFIED MAIL
Return Receipt Requested
No. 963329

Handwritten: Linlo Enterprises, Inc.
7771 Hood Street
Hollywood, FL 33024-2525



Is your RETURN ADDRESS completed on the reverse side

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: *961086*
 Linlo Enterprises, Inc.
 7771 Hood Street
 Hollywood FL 33024-2525

4a. Article Number: *96329*

4b. Service Type: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

I also wish to receive the following services (for an extra fee):

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 U.S. GPO: 199-323-714 DOMESTIC RETURN RECEIPT

6. Signature (Agent)