

ORIGINAL

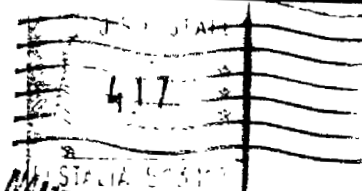
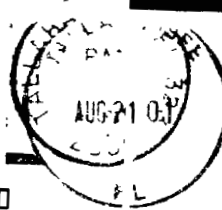
CERTIFIED MAIL

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7000 0600 0026 4144 9760



NAME: [Redacted]
1st Notice 8-28
2nd Notice 9-5
Return 9-13

UNCLAIMED
RETURNED TO SENDER
Sumtel, Inc.
Agustin R. Urra
536 Coral Way
Coral Gables FL 33134-4915

PLEASE FORWARD TO:
Irma and Agustin Urra
6924 SW 114 PL #F56
Miami, FL. 33173

32399-0850 [Postnet barcode]

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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.

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: 10580

4a. Article Number

Sumtel, Inc.
Agustin R. Urra
536 Coral Way
Coral Gables FL 33134-4915

Certified
 Insured
 Merchandise COD

Address (Only if requested)

6. Signature: (Addressee or Agent)
X

Printed on the reverse side?

Is your

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

APP
CAF
CMP
COM
CTR
ECR
LEG
OPC
PAI
RGO
SEC
SER
OTH

DOCUMENT NUMBER - DATE

12129 SEP 26 0

FPSC-COMMISSION CLERK