

# ORIGINAL

RECEIVED-FPSC

06 JAN 25 AM 10:00

COMMISSION  
CLERK

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

050759

CTC Trading LLC  
12252-1 Sag Harbor Court  
Wellington FL 33414-5408

PSC-06-0051-Co-TZ

2. Article Number

7004 1160 0004 5751 1664

(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X TIVA Date of Delivery 1/25  
TIVASCOLO  
 Agent  
 Addressee

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

CMP \_\_\_\_\_

COM \_\_\_\_\_

CTR \_\_\_\_\_

ECR \_\_\_\_\_

GCL \_\_\_\_\_

OPC \_\_\_\_\_

RCA \_\_\_\_\_

SCR \_\_\_\_\_

SGA \_\_\_\_\_

SEC   1  

OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

00715 JAN 25 08

FPSC-COMMISSION CLERK