FPSC-COMMISSION CLERK نسا 90 DOCUMENT NUMBER-DAT ຄ COMPLETE THIS SECTION ON DELIVERY JAN SENDER: COMPLETE THIS SECTION ECENTED-FPSC \sim A. Received by (Please Print Clearly) B. Date of Delivery N) Complete items 1, 2, and 3. Also complete ര് COMMISSION OLERK item 4 if Restricted Delivery is desired. ____ Print your name and address on the reverse 0093 C. Signature a. so that we can return the card to you. Agent Attach this card to the back of the mailpiece, Х Addressee or on the front if space permits. _____3_ 🗆 Yes D. Is delivery address different from item 1? 1. Article Addressed to: □ No If YES, enter delivery address below: 050731 Exergy Group, LLC 1550 West 84th Street, Suite 58 3. Service Type Hialeah FL 33014-3374 Certified Mail Express Mail Return Receipt for Merchandise Registered PSC-06-0051-W-TI Insured Mail 🗆 C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 7004 1160 0004 5751 1237 2. Article Number (Transfer from service label) State of Florida PS Form 3811, March 2001 **Domestic Return Receipt** 102595-01-M-1424 Mailed From 32399 US POSTAGE Public Service Commission FOR REASON SHOWNA <u>n n F</u> \$04.640 01/20/2006 047J82004132 7004 1160 0004 5751 1237 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850 Ð Exergy Group, LLC 15900 MICHIGAN AUG DEAR BORN MI 48126 1sodoau hilling de dichter bereiter bei bei dellen bei er bei e COM CMP SCR SEC OTH CTR ECR 0 0 0 SGA SCL RCA

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