

OUTSTANDING
\$ 05.550
US POSTAGE



CERTIFIED MAIL™



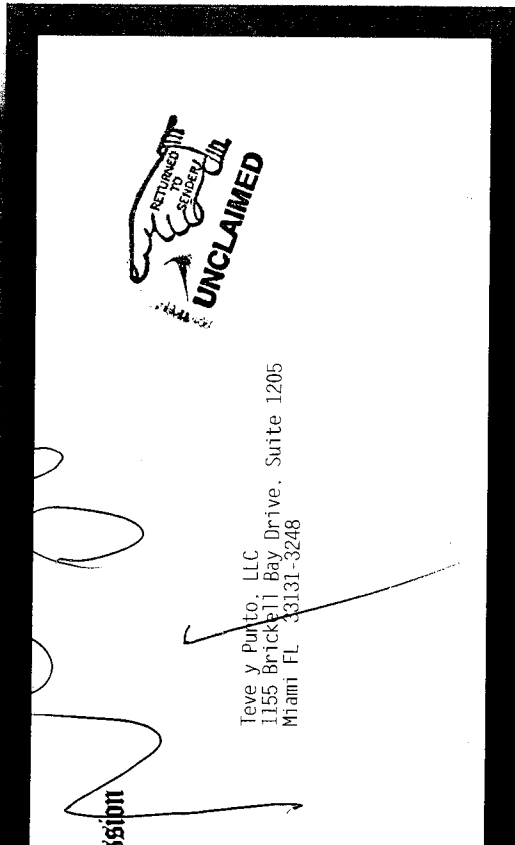
7005 3110 0002 8806 6317

State of Florida
Ambler & Associates
2500
Tallahassee, Florida 32301-8801

COMMISSION
CLERK

07 OCT -2 PM 4: 10

RECEIVED-FPSC



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
1. Article Addressed to: <u>070523</u>	
<p>Teve y Punto, LLC 1155 Brickell Bay Drive, Suite 1205 Miami FL 33131-3248</p>	
	<p>Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
2. Article Number (Transfer from service label) <u>7005 3110 0002 8806 6317</u>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

DOCUMENT NUMBER - DATE

09058 OCT -25

FPSC-COMMISSION CLERK