SCANNED

RECEIVED-PPSO 07 OCT -8 AMII: 02 CUMMISSION CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X Agent Addressee B. Received by (Printed Name) C. Date of Delivery M. MG NO PG C. Date of Delivery
1. Article Addressed to: 070 435	D. Is delivery address different from item 1?
AirTIME Technologies, Inc. 766 Pike Road	
West Palm Beach FL 33411	Service Type Certified Mail Registered Registered Insured Mail C.O.D.
PSC-07-0799-CO-TI	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7006 i	2760 0003 8797 6037
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE

09177 OCT-85

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