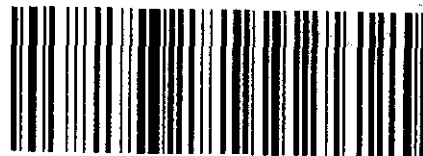


CERTIFIED MAIL™

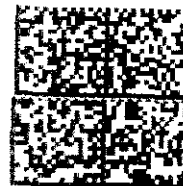
State of Florida

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5751 3071



047J82004132

\$05.490

08/14/2008

Mailed From 32399
US POSTAGE

Instatone
Mr. Michael Servos
P. O. Box 6434
Clearwater FL 33758-6434



1st NOTICE 8-16
2nd NOTICE 8-21
RETURNED 9-1-08

33758+6434



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:

080364

Instatone
Mr. Michael Servos
P. O. Box 6434
Clearwater FL 33758-6434

PSC-06-0524-PAA-TI

2. Article Number

(Transfer from service label)

7004 1160 0004 5751 3071

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

DOCUMENT NUMBER-DATE

08222 SEP-5 8

FPSC-COMMISSION CLERK

RECEIVED-FPSC
08 SEP -5 PM 1:22
COMMISSION CLERK