

110109-TX

RECEIVED-FPSC

11 MAY 23 AM 10:47

COMMISSION CLERK

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) Sarah Cantu</p> <p>C. Date of Delivery 5/17/11</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No S, enter delivery address below:</p>
<p>1. Article Addressed to:</p>	

Cogent Communications of Florida LHC, Inc.
 1015 31st Street, N.W.
 Washington DC 20007-4406

3. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes

110109 TX PSC-11-0220-PAAT

2. Article Number (Transfer from service label) 7009 3410 0002 4112 5511

DOCUMENT NUMBER-DATE

03565 MAY 23 =

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