

RECEIVED-FPSC

11 JUL 14 AM 11:50

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. 	A. Received by (Please Print Clearly) <i>Gerry How Rec</i>	B. Date of Delivery <i>7/14/14</i>
1. Article Addressed to: <p style="text-align: center;">PeerTel Communication, LLC 2564 N.E. Miami Gardens Drive Miami FL 33180-2706</p>	C. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, March 2001	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
<i>110162-T1 PSC-11-0260-PAA T1</i>		7009 3410 0002 4112 5986
Domestic Return Receipt		102505-01-M-1424

DOCUMENT NUMBER-DATE
 04858 JUL 14 =
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