

RECEIVED-FPSC

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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 checked="" type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>CHRISTIAN W MARCELLI ESQUIRE ROSE SUNDSTROM & BENTLEY LLP 766 N SUN DR STE 4030 LAKE MARY FL 32746</p>	<p>B. Received by (Printed Name) C. Date of Delivery Dana E. RUDOLF 9/29/11</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p>	<p>DNS 11375-08 04404-09</p> <p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7009 3410 0002 4112 6860</p>	
<p>Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1640</p>	

DOCUMENT NUMBER DATE

07146 OCT-3 =

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