

RECEIVED-FPSC

2016 JAN -4 AM 9: 14

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. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (<i>Printed Name</i>) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: <i>DP# 150001-E1 DN: 01039-14</i>	C. Date of Delivery	
Maria Moncada, Principal Attorney Florida Power & Light Company 700 Universe Boulevard Juno Beach, Florida 33408-0420	<input type="checkbox"/> Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If YES, enter delivery address below:	
2. Article Number (<i>Transfer from service label</i>)	7011 3500 0001 5977 8165	
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? (<i>Extra Fee</i>)	<input type="checkbox"/> Yes	