

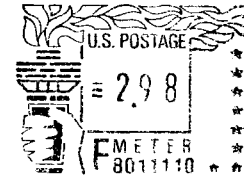
State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
 Tallahassee, Florida 32399-0850

ORIGINAL

*NO. 12/23*

RETURN TO SENDER  
 No Such No. Insuff. Add  
 Unclaimed Unknown  
 Forwarding Order Expired  
 Moved Left No Order  
**MIAMI, FL 331.0**



~~Isaac Cohen  
 Building G, #212  
 3750 N.E. 169th Street  
 North Miami Beach, FL 33162-1052~~

NAME \_\_\_\_\_  
 1st Notice \_\_\_\_\_  
 2nd Notice 12-28  
 Return 1-2

99-430

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**  
 ■ Complete items 1 and/or 2 for additional services.  
 ■ Complete items 3, 4a, and 4b.  
 ■ Print your name and address on the reverse of this form so that we can return this card to you.  
 ■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 ■ Write "Return Receipt Requested" on the mailpiece below the article number.  
 ■ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):  
 1.  Addressee's Address  
 2.  Restricted Delivery  
 Consult postmaster for fee.

3. Article Addressed to: 99410  
 Isaac Cohen  
 Building G, #212  
 3750 N.E. 169th Street  
 North Miami Beach FL 33162-1052

4a. Article Number 99450

Certified  
 Insured  
 COD

5. \_\_\_\_\_  
 6. Signature: (Addressee or Agent)  
**X**

and fee is paid) \_\_\_\_\_, Only if requested

Thank you for using Return Receipt Service.

2498

AFA APP CAF CMU CTR EAG LEG MAS OPC RRR SEC WAW OTH

DOCUMENT NUMBER - DATE  
**00555 JAN 128**  
 FFSC-RECORDS/REPORTING