ORIGINAL

| 6 | 1125-PAI | 4 | | | nn cit |
|--|---|---|--------------|--|--|
| B. Signature (Addressee or Agent) W. X. T. C. | FaxNet Corporation J. Britton Hutchins 98 North Washington Street Boston MA 02114-1918 | 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 card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write 'Return Receipt Requested' on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered. | | FaxNet Congress Besten Machington Boston Machingt | State of Florida Public Serbice Commission 2540 Shumari Oak Boulevard Tallahassee Florida 32399-0850 |
| Only if requested know hank you have had | umber ☐ Certified Return Recording Ret | wish to receive the ving services (for an fee): Addressee's Address Restricted Delivery ult postmaster for fee. | | 145 TREMO | hhres hhrh 92 |
| APP CAF COMP CTR ECR LEG OPC PAI RGO SEC SER | DOCUMENT NU 14357 | | MA. RAIII | 38ATEUG & U E | E 12 |

FPSC-COMMISSION CLERK