## State of Florida

## 3aublic Serbict Commissii

2540 Shumard Oak Boulevard Tallahassee，Florida 32399－0850

$\square$ Forwarding Order Expired
$\square$ Insufficiant Address Choi Moved，Lett No Adaress





| Senderi commate this sectron |  |  |
| :---: | :---: | :---: |
| Complete items 1，2，and 3．Also complete item 4 if Restricted Delivery is desired． <br> Print your name and address on the reverse so that we can return the card to you． <br> Attach this card to the back of the mailpiece， or on the front if space permits． | A．Received by（Ploese Print Cleary） | B．Date of Delin |
|  | C．Signature 口 Agent <br> $\mathbf{X}$ 口 Addressee <br> D．  |  |
| 1．Article Addressed to ： 0 リ． 934 <br> Choice Tetco．LLC <br> Bushnell The Park | D．Is delivery address different from item 17 XYes If YES，enter delivery address below：$\square$ No P．0．Box 270063 <br> West Hartford ct 06127－ 0063 |  |
| Hartford CT 06103－2928 |  |  |
|  | 4．Restricted Delivery？（Extra Fee） | $\square$ |
| 2．Articie Number （Transfer from service label） |  |  |
| Form 3811，March 2001 |  |  |

