

RECEIVED-FPSC

11 JUL 18 AM 10:30

COMMISSION
CLERK

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 type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>X [Signature]</i></p>	
<p>1. Article Addressed to:</p> <p>Dial World Communications, LLC 19109 S.W. 80th Court Miami FL 33157-7457</p>	<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery 7/18/16</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>PSC-11-0299-CD-T1</p>	<p>3. Service Type</p> <p><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>PS Form 3811, February 2004</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>110168 may 7009 3410 0002 4112 6334</p> <p>Domestic Return Receipt</p>	

DOCUMENT NUMBER-DATE
04943 JUL 18 =
FPSC-COMMISSION CLERK