

RECEIVED-FPSC
 15 AUG -3 AM 9:25
 COMMISSION
 CLERK

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

DN: 03881-15
 Dkt: 150001-E1

Blaise N. Gamba, Esquire
 Carlton Fields, P.A.
 4421 West Boy Scout Boulevard, Suite 1000
 Tampa, Florida 33607-5780

2. Article Number
 (Transfer from service label)

7006 0100 0003 1097 2945

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 George Lafont Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
George Lafont *7/29/15*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 Restricted Delivery? (Extra Fee) Yes