COMMISSION

14.8 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent X ☐ Addressee 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 05809-2017 Juno Beach FL 33406 20170123-E1 Kenneth Rubin, Senior Attorney Florida Power & Light Company Service Type 700 Universe Boulevard (LAW/JB) Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise Juno Beach, Florida 33408-0420 ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7015 1520 0002 5520 3161 (Transfer from service label) PS Form 3811, February 2004 102595-02-M-1540 Domestic Return Receipt