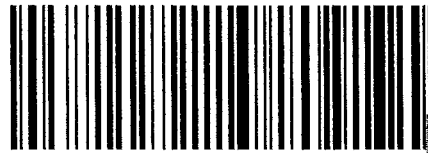


**CERTIFIED MAIL™**

State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



7005 3110 0002 8806 5624

04738200413  
\$05.210  
08/14/2007  
Mailed From 32399  
US POSTAGE

**RETURNED TO SENDER**  
REASON FOR RETURN  
Unclaimed  
Attempted - No delivery  
Insufficient address  
No such street  
No such office  
Do not remain in this envelope

79... U.S.A. Inc.  
... Drive  
... 17

*8-16-07*

NAME  
1st Notice 08-16  
2nd Notice 08-27  
Return 09-04

NIXIE 391 50 1 07 09/21/07

RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD

BC: 32399085099 \*1506-01990-21-18



**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: *070384*

*[Redacted]* Inc.  
*[Redacted]* Drive  
*[Redacted]* 17

*PSC-07-0652-CO-TC*

2. Article Number  
(Transfer from service label)

7005 3110 0002 8806 5624

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X**  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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.

4. Restricted Delivery? (Extra Fee)  Yes

RECEIVED FPSC  
COMMISSION CLERK  
07 SEP 25 PM 4:55

DOCUMENT NUMBER-DATE  
**08805 SEP 25 8**  
FPSC-COMMISSION CLERK