## DOCUMENT HEMSEN-DATE

## State of Florida

## Public Service Commission

2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

2875 South Ocean Corporation Daniel J. Manella 2875 South Ocean Blvd., Suite 200 Palm Beach FL 33480-5590

102595-98-B-0229 Domestic Return Receipt

CERTIFIED MAIL

Return Recipt Requested

<u>∞</u> PS Form **3811**, December 1994

No. 00-171

APR 25,00

SENDER:  Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you.  Attach this form to the front of the mailpiece, or on the back if space does not permit.  Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee):  1.  Addressee's Address 2.  Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: QGI873  2875 South Ocean Corporation Daniel J. Manella 2875 South Ocean Blvd., Suite 200 Palm Beach FL 33480-5590	4a. Article N	Shandise	Certified Insured COD
6. Signature: (Addressee or Agent)		ss (Only	if requested



LIA 513285

