RECEIVED-FPSC

08 SEP 12 PM 4: 25

COMMISSION CLERK

CONTROL OF THE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
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. 	A. Signature Agent Addressee Received by Printed No. 19 2011 C. Delta of Delivery B. Le delivery address different from Item 17. — Yes
1. Article Addressed to: 080.345	D. Is delivery address little entition item 1? If YES, enter delivery address provided by No. 19 No
	The service and
MAJOR COMMUNICATIONS CONS	JULTING, INC. USPS
P. O. Box 617	
	3. Service Type Certified Mail Registered Insured Mail C.O.D.
P. O. Box 617 Tangerine FL 32777-0817	3. Service Type **** Certified Mail
P. O. Box 617 Tangerine FL 32777-0817 PSC-08-05169-CD-TC	3. Service Type *** Certified Mail

DOCUMENT NUMBER-DATE

08553 SEP 12 8

FPSC-COMMISSION CLERK