110121-TX



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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
1. Article Addressed to:	D. Is delivery address different from item 1? Ves If YES, enter delivery address below:
Home Town Telephone, LLC 1100 N.W. 163rd Drive, Suite A Miami FL 33169-5816	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandlse Insured Mail C.O.D.
110121-TX PSC-11-0221-PAA	4. Restricted Delivery? (Extra Fee) Ves
2. Article Number 7009 341.((Transfer from service label)	0002 4112 5498
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

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