SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>		A. Signature  X
Anatoly M. Darov BURNS & LEVINSON LLP 125 Summer Street Boston, MA 02110 Docket No. EPCRA-01-2011-0077		OCT 31 2011
		3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise  C.O.D.
		4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	7010 1670	2832 6162 0000 0

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540