

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Brody, LLC</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>8-2006</i></p>
<p>1. Article Addressed to:</p> <p><i>CWA-07-2006-0167</i></p> <p>Jack Willis, Registered Agent South Park Development Company, LLC 410 Smiley P.O. Box 147 Tonganoxie, Kansas 66068</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p><i>7004 2510 0006 9718 3971</i></p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	

Recipient (Rt) *Jack Willis, Registered Agent*
 (En) *South Park Development Company, LLC*
 T *410 Smiley*
 Sender (Se) *P.O. Box 147*
 Str *Tonganoxie, Kansas 66068*
 or t _____
 City, State, ZIP+4 _____

PS Form 3800, June 2002 See Reverse for Instructions

7004 2510 0006 9718 3971