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 X
1. Article Addressed to: #5DWA-08-2014-0040 L SEP 6 5 2014	If YES, enter delivery address below:
TA Operating, LLC 2711 Centerville Rd., Ste 400 Wilmington, DE 19808	3. Service Type Certifled Mail Registered Return Receipt for Merchandise C.O.D.
The second secon	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 (Transfer from service label)	3410 0000 2596 5692
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540