Exh D

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.

1. Article Addressed to:

National Registered Agents, Inc.
Registered Agent for
The Askins Development Group, LLC
120 S Central Ave., Ste. 400
Clayton, MO 63105

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X L Walters
☒ Agent
☐ Addressee

B. Received by (Printed Name) L. Walters
C. Date of Delivery 10.4.19

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0000 6118 7303

PS Form 3811, July 2013 Domestic Return Receipt

UNITED STATES POSTAL SERVICE
ST LOUIS 630
4 OCT 2019
PM 2L

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•

Britt Bieri **ORC**
US ENVIRONMENTAL PROTECTION AGENCY
Region 7
11201 Renner Boulevard
Lenexa, KS 66219