|    |  |              | • *  |                         |
|----|--|--------------|--|-------------------------|
|    | <ul> <li>SENDER: COMPLETE THIS SECTION</li> <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> <li>Complete Addressed to:</li> <li>Dan Kubr Registered Agent for Kubr Construction, Inc.</li> </ul> |              | COMPLETE THIS SECTION ON DELIVERY  |                         |
| r. |  |              | A. Signature<br>X Agent<br>B. Received by (Printed Name)<br>DAULUBA<br>D. Is delivery address different from Item 1? Yes<br>If YES, enter delivery address below: No                           |                         |
|    |  |              |  |                         |
|    | 10077 Saltillo Road<br>Roca, NE 68430  |              | <ol> <li>Service Type</li> <li>Certified Mail          Express         Registered              Insured Mail              C.O.D.         </li> <li>Restricted Delivery? (Extra Feel)</li> </ol> | Receipt for Merchandise |
|    | 2. Article Number<br>(Transfer from service lab  | 7004 2510    | 0006 9718 3513   |                         |
|    | PS Form 3811, February 2004  | Domestic Ret | um Receipt   | 102595-02-M-1540        |
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