

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>RECEIVED CITY CLERK</p> <p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p> <p>JUL 10 A 11:32</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>06/19/2013 Case No. 122526 Shadrach LLC 7582 Las Vegas Blvd S, #228 Las Vegas, NV 891234-1009</p>		<p>3. Service Type</p> <p><input 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>2. Article Number</p> <p>(Transfer from service label) 7012 0470 0000 9891 9122</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	
		<p>102595-02-M-1540</p>	

RECEIVED
 CITY CLERK
 2013 JUL 10 A 11:32

NIXIE 891 DE 1260 0007/07/13
 RETURN TO SENDER UNCLAIMED
 UNABLE TO FORWARD
 BC: 89101631895 *0194-04397-07-39
 89101631895

06/19/2013 Case No. 122526
 Shadrach LLC
 7582 Las Vegas Blvd S, #228
 Las Vegas, NV 891234-1009

RECEIVED
 CITY CLERK
 2013 JUL 10 A 11:32

6/9

\$06.08
 JUN 05 2013
 0004279218
 MAILED FROM ZIP CODE 89101



CERTIFIED MAIL™

CITY OF LAS VEGAS
 OFFICE OF THE CITY CLERK
 495 S. MAIN STREET
 LAS VEGAS, NEVADA 89101