

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:

9-18-2013 Case No. 122526
 Shadrach LLC
 7582 Las Vegas Blvd. S., #228
 Las Vegas, NV 89123-1009

2. Article Number

(Transfer from service label)

7012 0470 0000 9891 1904

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

RECEIVED
CITY CLERK☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

EC: 89181631295 *0194-8855-07-48

RETURN TO SENDER
 ATTEMPTED - NOT KNOWN
 UNABLE TO FORWARD

NIXIE 891 DC 1 0009/07/13

Las Vegas NV 89123-1009

7582 Las Vegas Blvd. S., #228

Shadrach LLC

Case No. 122526 9-18-2013

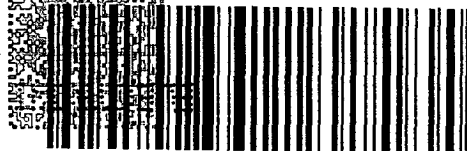
RECEIVED
CITY CLERK

SEP 10 A 11: 16

MAILED PM ZIP CODE 89101
 SEP 05 2013

\$06.08

HITNEY BOWES



CERTIFIED MAIL™

CITY of LAS VEGAS

OFFICE OF THE CITY CLERK

CITY HALL

495 S. MAIN STREET

LAS VEGAS, NEVADA 89101

ANY