

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <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 malipiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:      C T Corporation System     Registered Agent for Winstar     Communications, LLC	If YES, enter delivery address below: No
120 S. Central Ave. Clayton, MO 63105	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7004 1350 E	1003 1351 6476
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-154