

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website

OFFICIAL

7014 2870 0001 3244 0542

Postage \$ _____
 Certified Fee _____
 Return Receipt *
 (Endorsement Required) _____
 Restricted *
 (Endorsement) _____

Se _____
 Street _____
 or PO Box _____
 City, State, & ZIP _____

3000 BROADWAY SPE LLC
 C/O LOWE ENTERPRISES REAL ESTATE GROUF
 595 MARKET STREET, SUITE 2550
 SAN FRANCISCO, CA 94105
 ATTN: ALAN CHAMORRO

000247

PS Form 3800, July 2014

See Reverse for Instructions

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.

3000 BROADWAY SPE LLC
 C/O LOWE ENTERPRISES REAL ESTATE GROUF
 595 MARKET STREET, SUITE 2550
 SAN FRANCISCO, CA 94105
 ATTN: ALAN CHAMORRO

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 1/19

Address different from item 1? Yes
 If 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 2870 0001 3244 0542

PS Form 3811, July 2013

Domestic Return Receipt