COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent 📮 Addressee Print your name and address on the reverse so that we can return the card to you. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delive 1. Article Addressed to: If YES, MAY 15 2015 RGG LLC ET AL. 360 17TH ST #204 OAKLAND, CA 94612-3340 Service by Certified Mail ☐ Express Mail Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 3500 0003 1848 1387 (Transfer from service label) PS Form 3811, February 2004 102595-02-M-1540 Domestic Return Receipt

