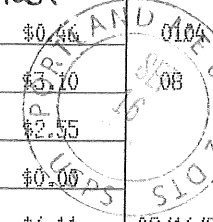


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BOSTON MA 02116 *Ins.*

Postage	\$ 0.46		Postmark Here
Certified Fee	\$3.70		
Return Receipt Fee (Endorsement Required)	\$2.55		
Restricted Delivery Fee (Endorsement Required)	\$0.00		
Total Postage & Fees	\$ 6.11	09/16/2013	

Sent To: *Forest Avenue Plaza LLC*
 Street, Apt. No., or PO Box No. *715 Boylston St.*
 City, State, ZIP+4 *Boston, MA 02116*

PS Form 3800, August 2006 See Reverse for Instructions

5029 6217 7337 6202

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:

Forest Avenue Plaza LLC
715 Boylston St
Boston, MA 2116

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) Date of Delivery
[Signature] 9-18-13

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

7013 1090 0002 1737 6205