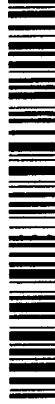


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

FRITZ JAIR D & NASCIMENTO MARIA L
10646 BARN RD
WELLINGTON, FL 33449-6724



9590 9402 4100 8092 3247 19

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4683

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

SAIR F RITZ

C. Date of Delivery

10/10/2026

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

1175-2024 #8 182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Signature Confirmation Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.

1. Article No.

JAIR D. FRITZ
10646 BARN ROAD
LAKE WORTH, FL 33449



9590 9402 4100 8092 3247 88

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4560

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X JAIR FRITZ

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/19/26

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

1175-2024 #21

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation®
- ☐ Signature Confirmation Restricted Delivery

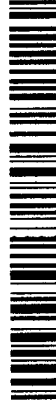
Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MARIA LUIZA INACIO DO NASCIMENTO
10646 BARN ROAD
LAKE WORTH, FL 33449



9590 9402 4100 8092 3247 02

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4690

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

JAR FRI 12

C. Date of Delivery

10/10/2026

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

1175-2024 #9 11182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Complete Items 1, 2, and 3.

Print your name and address on the reverse
side of the mailpiece, if permitted.

Print the front of the mailpiece, if permitted.

Addressed to:
COUNTRY MORTGAGE, LLC
100 AVENUE
CL 44114



9590 9402 4



92 3247 71

2. Article Number (Transfer from label)

7112 0170 6470 0232 4737

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Theresa East*☐ Agent☐ Addressee

B. Received by (Printed Name)

Theresa East

C. Date of Delivery

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes☐ No

1175-2024 #13 11182026

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery
(over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted
Delivery☐ Return Receipt for
Merchandise☐ Signature Confirmation™☐ Signature Confirmation
Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

GREYMORR FL LLC
5002 DODGE ST, 203
OMAHA, NE 68132



9590 9402 4100 8092 3246 65

Article Number (Transfer from service label)

0170 6470 0232 4553

3R11, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent ☐ Addressee

B. Received by Printed Name C. Date of Delivery 10-13-26

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

1175-2024 #1 11182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS
5660 NEW NORTHSIDE DRIVE, 3RD FLOOR
ATLANTA, GA 30328



9590 9402 4100 8092 3246 72

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4720

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

☐ Agent

☐ Addressee

☐ Date of Delivery

☐ Yes

☐ No

☐ Is delivery address different from item 1?

☐ Yes

☐ No

☐ Address below:

1175-2024 #12 11182026

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MURTY AGEE ELECTRONIC REGISTRATION
1901 E. VOORHEES ST., SUITE C
DANVILLE, IL 61834



9590 9402 4100 8092 3246 89

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4713

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

☐ No

1175-2024 #11 11182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail (over \$500)
- ☐ Insured Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS
P.O. BOX 2026
FLINT, MI 48501-2026



9590 9402 4100 8092 3246 96

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4706

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent

☒ MERS Mailroom

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

OCT 15 2026

D. Is delivery address different from item 1?

☐ Yes

☐ No

If address is different, address below:

1175-2024 #10 11182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
CROSSCOUNTRY MORTGAGE, LLC
C T CORPORATION SYSTEM RA
1200 SOUTH PINE ISLAND
PLANTATION, FL 33324



9590 9402 4100 8092 3247 57

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4751

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **RECEIVED**

X ☒ Agent ☐ Addressee

B. Received by **OCT 13 2026** C. Date of Delivery

D. Is delivery address different from item 1? **CT CORPORATION**
If YES, enter delivery address below: ☐ Yes ☐ No

1175-2024 #15 11182026

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS
C T CORPORATION RA
1200 SOUTH PINE ISLAND
PLANTATION, FL 33324



9590 9402 4100 8092 3247 64

2. Article Number (Transfer from service label)

7112 0170 6470 0232 4744

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** OCT 13 2026 ☐ Agent ☐ Addressee

B. Received by (Printed Name) **CT CORPORATION** C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

Address below: **1175-2024 #14 11182026**

3. Service Type

☐ Adult Signature	☐ Registered Mail™
☐ Adult Signature Restricted Delivery	☐ Registered Mail Restricted Delivery
☐ Certified Mail®	☐ Return Receipt for Merchandise
☐ Collect on Delivery	☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Insured Mail (over \$500)	☐ Insured Mail Restricted Delivery

Domestic Return Receipt