

**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:

**WILLIAM O'DONNELL**  
**MAKE IT HAPPEN ELECTRICAL LLC**  
**12003 SW ELSINORE DR**  
**PORT SAINT LUCIE, FL 34987**  
**CITATION 31853, 31865, & 31863 HEARING NOTICE**



9590 9402 9237 4295 5259 37

2. Article Number (Transfer from service label)

9589 0710 5270 1698 9507 59

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**☐ Agent☐ AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

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

E. 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

Domestic Return Receipt



Building Department, Contractor Licensing  
121 SW Port St. Lucie Blvd., Building B  
Port St. Lucie, FL 34984

MIAMI FL 330

29 MAR 2025PM 1 L



quadiënt

FIRST-CLASS MAIL  
IMI

**\$009.64<sup>0</sup>**

03/28/2025 ZIP 34984  
043M31222068

US POSTAGE

ANK

**WILLIAM O'DONNELL  
MAKE IT HAPPEN ELECTRICAL LLC  
12065 SW ELSINORE DR  
PORT SAINT LUCIE FL 34987**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1698 9507 59

NIXIE

331 EE 1

2204/03/25

RETURN TO SENDER  
ATTEMPTED - NOT KNOWN  
UNABLE TO FORWARD

ANK

34984504221

\*2006-02062-30-01

349845042219165

