

PS Form 3811, July 1983

**SENDER: Complete items 1, 2, 3 and 4.**  
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1.  Show to whom, date and address of delivery.  
2.  Restricted Delivery.

3. Article Addressed to:  
C.T. Corp, as Registered Agent for  
McDevitt & Street Co.  
75 Beattie Place, 2 Shelter Center  
Greenville, S.C. 29601

4. Type of Service: Article Number  
 Registered  Insured  
 Certified  COD P 333 323 804  
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X *B. Mend...*

6. Signature - Agent  
X

7. Date of Delivery  
11/17/87

8. Addressee's Address (ONLY if requested and fee paid)  
*Home or above*

DOMESTIC RETURN RECEIPT

DELIVER TO ADDRESSEE ONLY

PS Form 3811, July 1983

**SENDER: Complete items 1, 2, 3 and 4.**  
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1.  Show to whom, date and address of delivery.  
2.  Restricted Delivery.

3. Article Addressed to:  
Charles Satterfield, as Registered  
Agent for Satterson Construction Co.  
240 E. Howell Road  
Greer, S.C. 29651

4. Type of Service: Article Number  
 Registered  Insured  
 Certified  COD P 333 323 805  
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X *Charles Satterfield*

6. Signature - Agent  
X *[Signature]*

7. Date of Delivery  
11/17/87

8. Addressee's Address (ONLY if requested and fee paid)

DOMESTIC RETURN RECEIPT

DELIVER TO ADDRESSEE ONLY

Vol 21-111

PS Form 3811, July 1983

**SENDER: Complete items 1, 2, 3 and 4.**  
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1.  Show to whom, date and address of delivery.  
2.  Restricted Delivery.

3. Article Addressed to:  
James T. Cobb, Managing General  
Partner  
Greenville Park Central Associates  
555 North Pleasantburg Drive  
Greenville, S.C. 29615

4. Type of Service: Article Number  
 Registered  Insured  
 Certified  COD P 333 323 803  
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
X *[Signature]*

6. Signature - Agent  
X

7. Date of Delivery  
11/23/87

8. Addressee's Address (ONLY if requested and fee paid)

DOMESTIC RETURN RECEIPT

DELIVER TO ADDRESSEE ONLY

Recorded Nov 25, 1987 at 4:47 P/M

25215