

# EXHIBIT: B1

7020 1810 0002 3169 3971

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ 4.00	Postmark Here
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ 3.50	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ 2.95	
Total Postage and Fees \$ 16.20	
Sent To <u>Bruce R. Winn, President/CEO</u>	
Street and Apt. No., or PO Box No. <u>300 Centerville Road #300</u>	
City, State, ZIP+4® <u>Warwick, Rhode Island 02886</u>	
PS Form 3800, April 2015 PSN 7530-02-900-9047 See Reverse for Instructions	

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Total Postage and Fees \$ 16.20	
Sent To <u>Bruce R. Winn, President/CEO</u>	
Street and Apt. No., or PO Box No. <u>251 Little Falls Drive</u>	
City, State, ZIP+4® <u>Wilmington, Delaware 19808</u>	
PS Form 3800, April 2015 PSN 7530-02-900-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature X <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p>	
<p>1. Article Addressed to:</p> <p><u>Bruce R. Winn, President/CEO</u>  <u>CORPORATION SERVICE COMPANY (INC)</u>  <u>MHF ALEXANDRIA V LLC</u>  <u>Affidavit of Dispute [Ex. A], A1, A2</u>  <u>Adverse Claim of Title [Ex. B]</u>  <u>Memorandum of Trust</u></p> <p>9590 9402 7033 1225 4482 52</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p><b>7020 1810 0002 3169 3988</b></p>		<p>Mail Restricted Delivery</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

Tracking Number:

Remove X

**70201810000231693971**

Copy

Add to Informed Delivery

(https://informedelivery.usps.com/)

### Latest Update

Your item was delivered to an individual at the address at 10:18 am on October 6, 2022 in WARWICK, RI 02886.

### Delivered

**Delivered, Left with Individual**

WARWICK, RI 02886

October 6, 2022, 10:18 am

[See All Tracking History](#)

Feedback

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**Text & Email Updates**

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**USPS Tracking Plus®**

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**Product Information****See Less** ^

Track Another Package