REQUEST TO ESTABLISH DOCKET (Please type or print. File original <i>plus</i> 1 copy with CLK.)						
Date:	4/26/2010		Docket No.:	100222-TX		
1. From Staff / Division:		Pruitt/ Rad				
2. OPR:	RAD					
3. OCR:	3. OCR: GCL					
for ap			for apparent first-	compliance investigation of CLEC Certificate No. 8755, issued to Lleida.Net USA, Inc., or apparent first-time violation of Rule 25-4.0161, F.A.C., Regulatory Assessment ees; Telecommunications Companies.		
5. Prograr	n/Modul	le/Submod	lule Assignment:		A18a, A10	
6. Sugges	ted Doc	ket Mail Li	st.			
a. Provide NAMES/AC		MES/ACR	RONYMS, if registered company.		Provided as an Attachment	
Company Code, if applicable: TX989		Parties (include address, if different from MCD):		nt from MCD):	Representatives (name and address):	
b. Pro Company			NAME AND ADDR	ESS for all other	ers. (match representatives to companies)	
if applicat			address, if differen	t from MCD):	Representatives (name and address):	
7. Check o	ne:	🛛 Supp	orting Documenta	tion Attached	To be provided with Recommendation	
Comments:						



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LICENTIAL NEMBER - DATE

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FPSC-COMMISSION CLERK

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</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 mailplece, or on the front if space permits.</li> <li>Article Addressed to: TX989 Lleida.Net USA, Inc.</li> </ul>	A. Sighature Agent Agent Addressee B. Received by ( <i>Printed Name</i> ) C. Date of Delivery 2/24/00 D. Is delivery address different from Item 1? I Yes If YES, enter delivery address below: No
1680 Michigan Avenue, Suite 914 Miami Beach, FL 33139-2550	3. Service Type         X Certified Mail       Express Mail         Registered       X Return Receipt for Merchandise         Insured Mail       C.O.D.         4. Restricted Delivery? (Extra Fee)       Yes
2. Article Number (Transfer from service label) 7009 3410	0002 4112 0325
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

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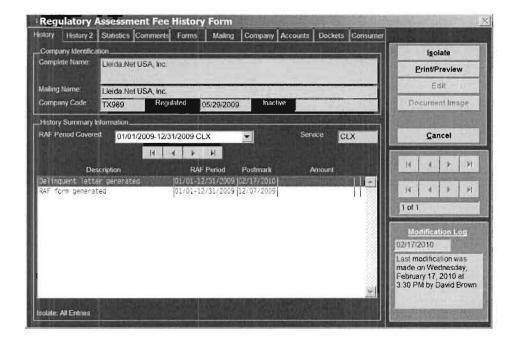
Regulatory Assessment Fee Account Information History History 2 Statistics Comments Forms Mailing Company Accounts Dockets Consumer Company Identification. **Print/Preview** Complete Name: Lieida Net USA, Inc. **RAF Documents** Annual Reports Mailing Name Lleida.Net USA, Inc. Company Code Regulated Edit 05/29/2009 Inactive TX989 \_RAF Account Information RAF Period Covered Cancel 01/01/2009-12/31/2009 CLX -CLX 4 4 4 nter of Thomas • Confidential
 RAF Form Received
 RAF Account Satisfied H 4 > PI Number of Payments Received: Ū O Actual Return Estimated Return Penalty III Interest 4 F H 14 Amended Return Do Not Galculate Extension Approved RAF Correspondence Suspended 1 of 1 Operating Revenue Gross Intrastate Revenue \$0.00 \$0.00 Nel RAF Due **RAF** Rate \$0.00 Modification Log Assessments. RAF 12/07/2009 Due Paid Owe \$0.00 \$0.00 \$0.00 Last modification was made on Monday, December 7, 2009 at 8.23 AM by David Brown Penalty \$0.00 \$0.00 \$0.00 Interest \$0.00 \$0.00 \$0.00 Extension Fee \$0.00 \$0.00 \$0.00 Total \$0.00 \$0.00 \$0.00

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