|                                                                                                                                                                                                                                                                                                 |            | (P                                                | REQUEST T            |                  |                                     |                 |                |           |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------|----------------------|------------------|-------------------------------------|-----------------|----------------|-----------|--|--|
| Date:                                                                                                                                                                                                                                                                                           | 5/18/20    | 10                                                |                      | Docket No.:      |                                     | 1002            | 910-T          | 1         |  |  |
| 1. From St                                                                                                                                                                                                                                                                                      | aff / Divi | sion:                                             | Division Of Regula   | tory Analysis/Pr | uitt                                | -               |                |           |  |  |
| 2. OPR:                                                                                                                                                                                                                                                                                         | RAD        |                                                   |                      |                  |                                     |                 |                |           |  |  |
| 3. OCR:                                                                                                                                                                                                                                                                                         | GCL        |                                                   |                      |                  |                                     |                 |                |           |  |  |
| <b>4. Suggested Docket Title:</b> Compliance investigation of IXC Registration No. TK203, issued to NexUSTel LLC d/b/a Nexus 123, for apparent first-time violation of Section 364.336, Florida Statutes, and Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies. |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
| 5. Progran                                                                                                                                                                                                                                                                                      | n/Modul    | e/Submod                                          | ule Assignment:      |                  | A18a                                | And A10         |                |           |  |  |
| 6. Suggested Docket Mail List.                                                                                                                                                                                                                                                                  |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
| a. Provide NAMES/ACRONYMS, if registered company.                                                                                                                                                                                                                                               |            |                                                   |                      |                  | □ P                                 | rovided as an   | Attachment     |           |  |  |
| Company Code,<br>if applicable:<br>TK203                                                                                                                                                                                                                                                        |            | Parties (include address, if different from MCD): |                      |                  | Representatives (name and address): |                 |                |           |  |  |
| 11/200                                                                                                                                                                                                                                                                                          |            | •                                                 |                      |                  |                                     |                 |                |           |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   | persons, if any,     | SS for all other | s. (ma                              | atch represent  | tatives to con | npanies)  |  |  |
| if applicat                                                                                                                                                                                                                                                                                     |            |                                                   | ddress, if different | from MCD):       | Repre                               | esentatives (na | ame and add    | ress):    |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   |                      |                  |                                     |                 |                |           |  |  |
|                                                                                                                                                                                                                                                                                                 |            |                                                   |                      | _                |                                     |                 |                |           |  |  |
| 7. Check o                                                                                                                                                                                                                                                                                      | ne:        | ⊠ Suppo                                           | orting Documentat    | ion Attached     | □ Te                                | o be provided   | with Recom     | mendation |  |  |
| Comments                                                                                                                                                                                                                                                                                        | »:         |                                                   |                      |                  |                                     |                 |                |           |  |  |

CFEK COMMISSION

10 MAY 18 PM 3: 07

BECEINED-LBCC

DOCUMENT NUMBER-CATE

## COMPANY IDENTIFICATION

Printed on 05/18/2010 at 14:48:50 by NEP

Complete Name: NexUSTel LLC d/b/a Nexus 123

Mailing Name: NexUSTel LLC

Company Code: TK203 FEID Number:

RAF ACCOUNT FOR THE PERIOD 01/01/2008 THROUGH 12/31/2008

Reg. Date:

05/05/2008

Inactive Date:

Service:

IXC - Interexchange Telephone

\$0.24

Received:

Actual RAF Form

Status:

Satisfied

Amended:

No

Extension:

No

No

Frozen:

No

Comments:

Operating Rev: RAF Rate: 0.0020

Payment Count: 1 Payment Made to Date

Net RAF Due:

Interstate Rev:

\$700.00

\$21,267.94

| Assessment    | Due      | Paid     | Owe    |
|---------------|----------|----------|--------|
| RAF           | \$700.00 | \$700.00 | \$0.00 |
| Penalty       | \$0.00   | \$0.00   | \$0.00 |
| Interest      | \$0.00   | \$0.00   | \$0.00 |
| Extension Fee | \$0.00   | \$0.00   | \$0.00 |
| Total         | \$700.00 | \$700.00 | \$0.00 |

Last modification was made on Thursday, January 29, 2009 at 2:18 PM by Valorie Moore

| or to the second of the second |                                                                |        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------|
| Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | A. Signature  X. Auch  B. Received by (Printed Nat  AN)) black | 5/1/10 |
| 1. Article Addressed to:  TK203-09-0-D  NexUSTel LLC  9700 South Dixie Highway, Suite \$50  Miami, FL 33156-2825                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D. is delivery address differentif YES, enter delivery add     |        |
| Wildliff, FL 33136-2825                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                |        |
| 2. Article Number 7009 34:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 70 0005 A775 71                                                |        |
| · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                |        |