REQUEST TO ESTABLISH DOCKET (Please type or print. File original plus 1 copy with CLK.)									
Date: 4/30/2013		,, ,	Docket No.:	130121-Tx	2	ω	H VE		
1. From Staff / Division:		ision:	22		SSI	R			
2. OPR: Toni Earnhart, TE		EL		9	00	ES			
3. OCR:	GCO						ယ	\mathbb{C}	
4. Suggested Docket Title:			Compliance investigation of cancelled local exchange Certificate No. 8785, issued to Teleconnect of California, LLC d/b/a Teleconnect LLC, for second-time violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.						
5. Program/Module/Submodule			lule Assignment:		A18a, A10				
6. Suggested Docket Mail List.									
a. Provide NAMES/ACRONYMS, if re			ONYMS, if register	ed company.	☐ Provided as an Attach	ment			
Company of applicated TY020		Parties (include a	address, if differen	t from MCD):	Representatives (name an	d address):		
b. Provide COMPLETE NAME AND ADDRESS for all others. (match representatives to companies) Company Code, Interested persons, if any,									
if applicat			address, if differen	t from MCD):	Representatives (name an	d address):		
7. Check o		⊠ Supp	orting Documenta	tion Attached	☐ To be provided with R	ecommen	dation	1	

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. X Print your name and address on the reverse so that we can return the card to you. C. Date of D B. Received by (Printed Name) Attach this card to the back of the mallplece, or on the front if space permits. D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 1. Article Addressed to: 920-12-0-D econnect LLC 881 Via De Costa 3. Service Type Le Certified Mail in Juan Capistrano, CA 92675-5384 DExpress Mall Return Receipt for Merchandise ☐ Registered ☐ C.O.D. ☐ Insured Mali 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 3500 0001 5979 3861 (Transfer from service label) 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
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.	A. Signature X Agent Addressee			
Attach this card to the back of the mailpiece, or on the front if space permits.				
Article Addressed to:	D. is delivery address different from item 1? If YES, enter delivery address below: No			
TY020-12-0-D Teleconnect LLC 27881 Via De Costa				
San Juan Capistrano, CA 92675-5384	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D.			
	4. Restricted Delivery? (Extra Fee) ☐ Yes			
2. Article Number 7011.	3500 0001 5979 3861			
PS Form 3811, February 2004 Domesti	tic Return Receipt 102595-02-M-1540			

COMMISSIONERS:
RONALD A. BRISÉ, CHAIRMAN
LISA POLAK EDGAR
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EDUARDO E. BALBIS
Julie I. Brown





OFFICE OF THE GENERAL COUNSEL S. CURTIS KISER GENERAL COUNSEL (850) 413-6199

Public Service Commission

February 21, 2013

TY020-12-0-D
Teleconnect LLC
27881 Via De Costa
San Juan Capistrano, CA 92675-5384

Dear Certificate/Registration Holder:

The purpose of this letter is to inform you that the Commission has not received the 2012 Regulatory Assessment Fee (RAF) return and payment. As required by Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code (F.A.C.), you were mailed a RAF return form on December 15, 2012, and payment was due on January 30, 2013.

Because you are delinquent in payment, in addition to the RAF, which is 0.0016 of a company's intrastate revenues or a minimum fee of \$600, whichever is greater, the company must now pay late payment charges. The late payment charges, consisting of interest and penalty, are outlined on the reverse side of the RAF return form. If you have misplaced or require a copy of the 2012 RAF return form, please contact David Brown or Valorie Moore at the numbers listed below or via e-mail.

If payment is not postmarked within 15 calendar days of receipt of this notice, as evidenced by the certified mail reciept. Rule 25-4.0161, F.A.C., automatically imposes a penalty of \$500, \$1,000, or \$2,000, in addition to the interest and penalty listed in the preceding paragraph. The penalty is based on the number of prior dockets against a company for violation of the RAF rule. For example, if a company has no prior dockets and fails to pay in accordance with this notice, it automatically will be assessed a \$500 penalty. For one prior docket, it automatically will be assessed a \$1,000 penalty and for two, a \$2,000 penalty. For a third docket, staff will submit a recommendation to the Commission seeking cancellation of the company's certificate or cancellation of its tariff and removal from the register.

Therefore, it is very important that you pay the 2012 Regulatory Assessment Fee plus late payment charges immediately. If you have any questions, please contact David Brown at (850) 413-6267 or Valorie Moore at (850) 413-6275 or via e-mail at dbrown@psc.state.fl.us or vmoore@psc.state.fl.us.

Sincerely,

S. Curtis Kiser

Office of the General Counsel

cc: Fiscal Services Section

PSC Website: http://www.floridapsc.com

Internet E-mail: contact@psc.state.fl.us





