

ORIGINAL

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JAN 24 AM 10:46

COMMISSION
CLERK

Utility USA
3814 Woods Walk Blvd
Lake Worth Fl, 33467

Att: Blanca Bayo
Public Service Comition
Cleck Administrator

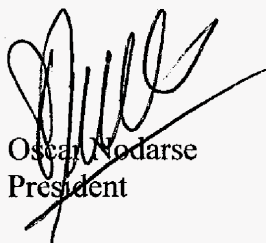
050055-TK

In reference to Docket 040976-TX

I would like to add DBA Vizon Telecom to Utility USA please contact me if you have any questions or if there is anything else you need for this change

Appreciate your attention to this matter,

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- RCA _____
- SCR _____
- SEC _____
- OTH _____



Oscar Nodarse
President

05 JAN 24 AM 9:19
DISTRIBUTION CENTER

DOCUMENT NUMBER-DATE
00807 JAN 24 '13
FPSC-COMMISSION CLERK

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

VIZONTELECOM
 Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

3814 WOODS WALK BLVD
 Mailing Address of Business

LAKE WORTH FLORIDA 33467
 City State Zip Code

3. Florida County of principal place of business: _____
 PALM BEACH
 (see instructions if more than one county)

4. FEI Number: _____

This space for office use only

Section 2

A Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. Last _____ First _____ M.I. _____
 Address _____
 City _____ State _____ Zip Code _____

2. Last _____ First _____ M.I. _____
 Address _____
 City _____ State _____ Zip Code _____

B Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. Name _____
 3814 WOODS WALK BLVD
 Address
 LAKE WORTH FL 33467
 City State Zip Code
 Florida Registration Number P03000092192
 FEI Number: 200173084
 Applied for Not Applicable

2. Entity Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Florida Registration Number _____
 FEI Number: _____
 Applied for Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Signature of Owner _____ Date _____
 Phone Number: 581-642-2540

Signature of Owner _____ Date _____
 Phone Number: _____

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned hereby cancel the fictitious name _____
 _____, which was registered on _____ and was assigned
 registration number _____

Signature of Owner _____ Date _____
 Signature of Owner _____ Date _____

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30
FILING FEE: \$50

CR4E001B (1/02)



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 29, 2004

VIZONTELECOM
3814 WOODS WALK BLVD
LAKE WORTH, FL 33467

Subject: **VIZONTELECOM**

REGISTRATION NUMBER: **G04273900422**

This will acknowledge the filing of the above fictitious name registration which was registered on September 29, 2004. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

Fictitious Name Section
Division of Corporations

Letter No. 904A00057069