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MESSER CAPARELLO & SELF, P.A.

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COMMISSION  
CLERK

April 20, 2007

**BY HAND DELIVERY**

Ms. Ann Cole, Director  
Commission Clerk and Administrative Services  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, Florida 32399-0850

Re: Name Change

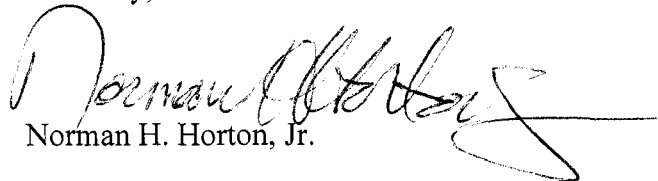
070 277-74

Dear Ms. Cole:

This is to advise you that Broadstar, LLC has filed a registration of fictitious name with the Secretary of State (copy attached) and requests acknowledgement of the change of name on Certificate No. TX 875 and the Commission's records from Broadstar, LLC to Broadstar, LLC d/b/a PrimeCast. There will be no transfer of customers nor any change in the service provider. The company will be sending a notice of the name change to each customer.

Should you have any questions or require additional information please do not hesitate to call me.

Sincerely,



Norman H. Horton, Jr.

NHH/amb

cc: Ms. Beth Salak  
Mr. Rick Moses  
Mr. John Lindsey

DOCUMENT NUMBER-DATE

03386 APR 20 5

FPSC-COMMISSION CLERK

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

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

Section 1

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

111 Corning Road, Suite 250  
Mailing Address of Business

Cary North Carolina 27518  
City State Zip Code

3. Florida County of principal place of business: \_\_\_\_\_  
multiple  
(see instructions if more than one county)

526177

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 \_\_\_\_\_ MI \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

2. Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

1. Broadstar, LLC  
Entity Name  
3800 Park Central Blvd. N  
Address  
Pompano Beach, Florida 33064  
City State Zip Code  
Florida Registration Number L05000048854  
FEI Number: 20-2848917  
 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)

CHRISTIAN ACUAREZ 3/8/07  
Signature of Owner Date  
Phone Number: 954-369-3300

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  
NON-REFUNDABLE PROCESSING FEE: \$50