



# NOWALSKY, BRONSTON & GOTHARD

A Professional Limited Liability Company

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2008 JUN -6 PM 2: 32

DIVISION OF  
COMPETITIVE SERVICES

June 5, 2008

*Via Overnight Mail*

Beth Salak, Director  
Competitive Markets and Enforcement  
Florida Public Service Commission  
2540 Shumard Oak Drive  
Tallahassee, FL 32399-0850

RE: VoDa Networks, Inc.  
IXC Registration

Dear Sir or Madam:

Enclosed please find an original and two (2) copies of the IXC registration on behalf of VoDa Networks, Inc.

An additional copy of this revision has been enclosed to be file stamped and returned in the envelope provided as evidence of the filing.

Should you have any questions, please do not hesitate to call.

Sincerely,



Becky Heggelund

/bh  
Enclosure

DOCUMENT NUMBER-DATE

04989 JUN 11 08

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# IXC REGISTRATION FORM

Company Name VoDa Networks, Inc.

Florida Secretary of State Registration No. \_\_\_\_\_

Fictitious Name(s) as filed at Fla. Sec. of State \_\_\_\_\_

Company Mailing Name VoDa Networks, Inc.

Mailing Address 6851 Jericho Turnpike, Suite 120, Syosset, NY 11791

Web Address www.vodanetworks.net

E-mail Address mberg@vodanetworks.net

Physical Address 6851 Jericho Turnpike, Suite 120, Syosset, NY 11791

Company Liaison Michael Berg

Title President

Phone (516)-740-6600

Fax (516)-740-6670

E-mail address mberg@vodanetworks.net

Consumer Liaison to PSC Michael Berg

Title President

Address 6851 Jericho Turnpike, Suite 120, Syosset, NY 11791

Phone (516) 740-6600

Fax (516) 740-6670

E-mail address mberg@vodanetworks.net

My company's tariff as required in Section 364.04, Florida Statutes, is enclosed with this form. I understand that my company must notify the Commission of any changes to the above information pursuant to Section 364.02, Florida Statutes. My company will owe Regulatory Assessment Fees for each year or partial year my registration is active pursuant to Section 364.336, Florida Statutes. My company will comply with Section 364.603, Florida Statutes, concerning carrier selection requirements, and Section 364.604, Florida Statutes, concerning billing practices.

  
\_\_\_\_\_  
Signature of Company Representative

Michael Berg  
\_\_\_\_\_  
Printed/Typed Name of Representative

6-5-08  
\_\_\_\_\_  
Date

DOCUMENT NUMBER-DATE

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