

# REQUEST TO ESTABLISH DOCKET

RECEIVED-FPSC

(Please type or print. File original *plus* 1 copy with CLK.)

11 MAY 16 PM 3:10

Date:	5/16/2011	Docket No.:	110150-T1
1. From Staff / Division:	Division Of Regulatory Analysis/Toni Earnhart		
2. OPR:	Toni Earnhart, RAD		
3. OCR:	GCO		
4. Suggested Docket Title:	Compliance investigation of IXC Registration No. TK217, issued to Telesur, LLC., for apparent first-time violation of Section 364.336, F.S., and Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.		
5. Program/Module/Submodule Assignment:	A18a, A10		
6. Suggested Docket Mail List.			
a. Provide NAMES/ACRONYMS, if registered company.		<input type="checkbox"/> Provided as an Attachment	
Company Code, if applicable:	Parties (include address, if different from MCD):	Representatives (name and address):	
TK217			
b. Provide COMPLETE NAME AND ADDRESS for all others. (match representatives to companies)			
Company Code, if applicable:	Interested persons, if any, (include address, if different from MCD):	Representatives (name and address):	
7. Check one:	<input checked="" type="checkbox"/> Supporting Documentation Attached		<input type="checkbox"/> To be provided with Recommendation
Comments:			

COM \_\_\_\_\_  
 APA \_\_\_\_\_  
 ECR \_\_\_\_\_  
 GCL \_\_\_\_\_  
 RAD \_\_\_\_\_  
 SSC \_\_\_\_\_  
 ADM \_\_\_\_\_  
 OPC \_\_\_\_\_  
 CLK N.G.

DOCUMENT NUMBER-DATE  
 03381 MAY 16 =  
 FPSC-COMMISSION CLERK

**Regulatory Assessment Fee (RAF) System**

File Edit View Payments Tools Reports Options Docket Viewer

**Regulatory Assessment Fee History Form**

History History 2 Statistics Comments Forms Mailing Company Accounts Dockets Consumer

Company Identification

Complete Name: Telesur, LLC.

Mailing Name: Telesur, LLC.

Company Code: TK217 Regulated: 08/07/2008 Inactive:

History Summary Information

RAF Period Covered: 01/01/2010-12/31/2010 IXC Service: IXC

Description	RAF Period	Postmark	Amount
Delinquent letter generated	01/01-12/31/2010	02/22/2011	
RAF form generated	01/01-12/31/2010	12/08/2010	

Isolate: All Entries

Isolate Print/Preview Edit Document Image Cancel

Modification Log

02/22/2011

Last modification was made on Tuesday, February 22, 2011 at 3:08 PM by David Brown

Start [Icons] » Inbox - ... Netflix - ... (369 unr... Regulat...

« 4:40 PM

DOCUMENT NUMBER - DATE  
 03381 MAY 16 =  
 FPSC-COMMISSION CLERK

COMPANY IDENTIFICATION

Printed on 05/06/2011 at 16:51:18 by TJE

Complete Name: Telesur, LLC.

Mailing Name: Telesur, LLC.

Company Code: TK217

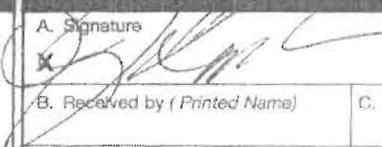
FEID Number: 20-8781443

RAF ACCOUNT FOR THE PERIOD 01/01/2010 THROUGH 12/31/2010

Reg. Date: 08/07/2008 Inactive Date:  
 Service: IXC - Interexchange Telephone  
 Received: No RAF Form  
 Status: Pending  
 Amended: No Extension: No  
 Frozen: No Comments: No  
 Payment Count: 0 Payments Made to Date  
 Operating Rev: \$0.00 Interstate Rev: \$0.00  
 RAF Rate:

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$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	\$0.00	\$0.00	\$0.00

Last modification was made on Wednesday, December 8, 2010 at 1:01 PM by David Brown

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> 	
1. Article Addressed to:  TK217-10-0-D Telesur, L.L.C. 9594 Doral Blvd., Suite 104 Miami, FL 33178-2908	B. Received by (Printed Name)	C. Date of Delivery
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No  _____	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)	7006 0100 0003 1056 9350	
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	A. Signature <b>X</b> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  TK217-10-0-D Telesur, LLC. 9594 Doral Blvd., Suite 104 Miami, FL 33178-2908	B. Received by ( <i>Printed Name</i> )  C. Date of Delivery
2. Article Number ( <i>Transfer from service label</i> )	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, February 2004	3. Service Type: <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
Domestic Return Receipt	4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes  7006 0100 0003 1056 9350 102595-02-M-1540