REDACTED - FOR PUBLIC INSPECTION

Rate Floor Data Collection - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW **DATA ELEMENT** 1 Carrier Study Area Code 6 numeric digits 2 Carrier Study Area Name alpha characters 3 Service Provider Identification Number 9 numeric digits 4 Residential Local Service Charge Effective Date 5 Contact Name 6 Contact Telephone Number (include area code)

7 Sheet Number

8 Total Number of Sheets

mm/dd/yy alpha characters 9 numeric digits numeric digit(s) numeric digit(s)

FORMAT OF

REQUESTED DATA

RESPONSE

SMART CITY TELECOMMUNICATIONS LLC dba SM.CITY 143023756

07/01/15 Huttenhower, Debbie

407-828-6656

210330



Block 2 - Residential Local Service Rates, Fees and Line Counts

400000			

Column 2 State Subscriber Line Charge

Column 3 State Universal Service Fee

Column 4 Mandatory Extended Area Service Charge

Column 5 Loops

Column 6 Exchange Name/Zone Name Celebration Celebration Celebration Lake Buena Vista Lake Buena Vista Lake Buena Vista

Column 7 Class Of Service

R1 Vacation Lifeline R1 R1 Lifeline

Certification of Officer as to the Accuracy	of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier Smart C	ity Telecommunica	ations LLC		
Signature of authorized officer	James 2/8	Lunally		Date 6/10/2015
Printed name of authorized officer Jam	nes Schumacher			Date
Title or position of authorized officer VF	Finance & Admin	istration		
Telephone number of authorized officer:	(407), 828-6656 _{, ext.}			
Study Area Code of Reporting Carrier	210330	Filing Due Date for this form (mm/dd/yyyy)	07/01/2015	