

FLORIDA PUBLIC SERVICE COMMISSION

DATE DEPOSIT

MAY 03 2021 4 4 4

OFFICE OF INDUSTRY DEVELOPMENT AND MARKET ANALYSIS

APPLICATION FOR ORIGINAL AUTHORITY
OR TRANSFER OF AUTHORITY
TO PROVIDE
TELECOMMUNICATIONS SERVICE
IN THE STATE OF FLORIDA

CX# 219
\$ 500.00
PR

Dkt #: 20210091

INSTRUCTIONS

This form should be used as the application for an original certificate and transfer of an existing certificate (from a Florida certificated company to a non-certificated company). In the case of a transfer, the information shall be provided by the transferee. If you have other questions about completing the form, call **(850) 413-6600**.

Print or type all responses to each item requested in the application. If an item is not applicable, please explain. All questions must be answered. If unable to answer the question in the allotted space, please continue on a separate sheet.

Once completed, submit the **original and one copy** of this form along with a **non-refundable** fee of **\$500.00** to:

Florida Public Service Commission
Office of Commission Clerk
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6770

RECEIVED-FPSC
2021 MAY -3 PM 12:05
COMMISSION
CLERK

APPLICATION

This is an application for (check one):

Original certificate (new company)

Approval of transfer of existing certificate: Example, a non-certificated company purchases an existing company and desires to retain the original certificate rather than apply for a new certificate.

Please provide the following:

1. Full name of company, including fictitious name(s), that must match identically with name(s) on file with the Florida Department of State, Division of Corporations registration:
Electric Lightwave, LLC DBA Allstream

2. The Florida Secretary of State corporate registration number: 0828860163CC

3. F.E.I. Number: 26-1398293

4. Structure of organization:

The company will be operating as a:
(Check all that apply):

- | | | | |
|-------------------------------------|---------------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | Corporation | <input type="checkbox"/> | General Partnership |
| <input type="checkbox"/> | Foreign Corporation | <input type="checkbox"/> | Foreign Partnership |
| <input checked="" type="checkbox"/> | Limited Liability Company | <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Sole Proprietorship | <input type="checkbox"/> | Other, please specify below: |

If a partnership, provide a copy of the partnership agreement.

If a foreign limited partnership, proof of compliance with the foreign limited partnership statute (Chapter 620.169, FS). The Florida registration number is: _____