CK#: 3503 Amnt: \$500-00 CK 1004er. 08/09/24

Deposit Number

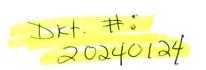
000751

FILED 8/20/2024 DOCUMENT NO. 08547-2024 FPSC - COMMISSION CLERK

## APPLICATION FOR ORIGINAL CERTIFICATE FOLLOWING RESCISSION OF JURISDICTION BY A COUNTY (GRANDFATHER CERTIFICATE)

Deposit Date
AUG 2 0 2024

(Pursuant to Section 367.171, Florida Statutes, and Rule 25-30.035, Florida Administrative Code)



To:	Office of Commission Clerk				
	Florida Public Service Commission				
	2540 Shumard Oak Boulevard				
	Tallahassee, Florida 32399-0850				

and/or wastewater utility in County, Florida, and submits the following information:										
PART	I		APPLICA	NT INFORMATI	ION					
A)	Contact Information for Utility. The utility's name, address, telephone number, Federal Employer Identification Number, and if applicable, fax number, e-mail address, and website address. The utility's name should reflect the business and/or fictitious name(s) registered with the Department of State's Division of Corporations:									
_	QUAIL HEIGHTS Utilities LLC									
	Utility Name  161 S.W. QUAIL HEIGHTS TENN.  Office Street Address									
_	161	SW. Q	JAIL H	EIGHTS T	ienr.					
	Office Street	t Address			9					
	LAKE	C.ty	FL		32025		7024			
-	City		State		Zip Code	COMMI	AUG 20			
Mailing Address (if different from Street Address)							- (			
						2	PM 12: 05			
	City		State		Zip Code		8			
	386, 752-3339									
Phone Number Fax Number										
	80	6-2334	1245							
	Federal Employer Identification Number									
	CCA	RIERGE	VAILHEIGH	4JSCC. Con	7					
	E-Mail Add	ress		A. M. T.						

Check received with filing and forwarded to Flacel for deposit. Fiscal to forward deposit information to Records.

initials of person who forwarded check:

8-16-24