## APPLICATION FOR RENEWAL OF STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY TO PROVIDE CABLE AND/OR VIDEO SERVICE

	Official name of the cable or video service provider:	2015 MAY -6 AM 8: U.	
	Summit Broadband Inc.	ers Fardan Video File Morising File Morising	
		UNITED SEE STORIGH	
	Street address of the principal place of business of the 4558 35th Street, Orlando, FL 32811	cable and/or video service provider:	
	Federal employer identification number or the Department of State's document number: FEIN - 26-4656527, Department of State Document # P09000032045		
	Name, address, and business telephone number of an omanger or managing member as a contact person for the whom questions or concerns may be addressed:		
	Name: Richard W Pardy		
	Title: Chief Executive Office, President		
	Address: 4558 35th Street, Orlando, FL 32811		
	Business telephone number: 407-996-8900		
	Names of other principal executive officers: Arthur Haas, Treasurer; Mark Lipford, COO; Brenda Kincaid, Corporate Secretar		
	Florida street address for, or on behalf of, the Cable Se purposes of service of process as required in Chapter 4		
	purposes of service of process as required in Chapter 4		
	purposes of service of process as required in Chapter 4 4558 35th Street	8, F.S.  the cable service provider's service the Division of Corporations. If	
	purposes of service of process as required in Chapter 4  4558 35th Street  Orlando  Florida, 32811  Service Area: On an attached page, list any change to area that is different from what is currently on file with the current service area is correctly listed with the Divi	the cable service provider's service the Division of Corporations. If sion, enter "no change"  the facts stated herein are true. I ament to the Department of State	
J	purposes of service of process as required in Chapter 4  4558 35th Street  Orlando  Florida, 32811  Service Area: On an attached page, list any change to area that is different from what is currently on file with the current service area is correctly listed with the Divibere: No Change  I submit this Application for Renewal and affirm that the aware that any false information submitted in a docum	the cable service provider's service the Division of Corporations. If sion, enter "no change"  the facts stated herein are true. I ament to the Department of State	



RICK SCOTT

Governor

KEN DETZNER

Secretary of State

May, 6, 2015

Mr. Richard W. Pardy Chief Executive Officer, President Summit Broadband Inc. 4558 35<sup>th</sup> Street Orlando, FL. 32811

Re:

Summit Broadband Inc.

CV09-0026

Dear Mr. Pardy:

We have received and filed your application for renewal of your State-Issued Certificate of Franchise Authority for cable and/or video service. A file stamped copy of your renewal application is attached for your records. Please be advised, a renewal application and fee of \$1035.00 is due every five years. The next Renewal Date for Summit Broadband Inc. will be: 4/16/2019.

The Federal Communication Commission's Cable Act Reform 47 C.F.R. 76.952 states that "all cable operators must provide to the subscribers the name, mailing address and phone number of the franchising authority, unless the franchising authority in writing request that cable operator to omit such information."

Since we are not authorized to regulate cable activities, the Department of State, Cable and/or Video Franchise Section, requests certificate holders to omit the department's name and contact information from the monthly billing inserts to subscribers. The Department of State does not have any authority to resolve customer service complaints. The Department of Agriculture and Consumer Services is responsible for responding to customers' complaints.

If you should have any questions, please call us at (850) 245-6010.

Rebekah White Video and/or Cable Franchise Section

Encl.



(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

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