COPELAND, COOK, TAYLOR & BUSH

A PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

MAILING ADDRESS

POST OFFICE BOX 6020 RIDGELAND, MISSISSIPPI 39158-6020

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CQ.

ORIGINAL

200 CONCOURSE, SUITE 200 1062 HIGHLAND COLONY PKWY. RIDGELAND, MISSISSIPPI 39157

010822-TI

June 1, 2001

VIA FEDERAL EXPRESS (850) 413-6770 Florida Public Service Commission Division of Records and Reporting 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

> RE: Application for Approval of Assignment or Transfer of Existing IXE Certificate in the State of Florida for Advantage Group of Florida Communications, LLP

Dear Sirs:

APP

CAF

CMP COM CTR

COR

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معن <sup>من</sup>ار مدر

PN PCD Enclosed are one original executed and six copies of the Application for Approval of Assignment or Transfer of Existing Interexchange Certificate for Advantage Group of Florida Communications, LLP ("Advantage Group").

Advantage Group has been formed in connection with reorganization of Daytona Telephone Company ("DTC") in a transaction in which the sole purpose was to convert the DTC entity from a corporation to a limited liability company, and to change its name. To achieve the reorganization, DTC has merged with and into Advantage Group. Advantage Group has the same officers and place of business of DTC.

DTC is qualified interexchange telecommunications company in Florida, IXE Certificate # 5796. Advantage Group will continue the interexchange business of DTC. Advantage Group \_has also applied to provide Alternative Local Exchange Service within the State of Florida and \_been assigned Docket #010266-TX.

For all practical purposes Advantage Group is merely a continuation of the business of -DTC in a different form of entity and under a new name. Therefor, all information on file -relative to DTC is equally applicable to Advantage Group. We request that this application for -transfer and name change be scheduled and put on your consent agenda for consideration at the -earliest practical time.

DOCUMENT NUMBER-DATE

07115 JUN-75

FPSC-RECORDS/REPORTING

THE PLAZA BUILDING 120 N. CONGRESS ST., SUITE 1000 JACKSON, MISSISSIPPI 39201

JACKSON OFFICE

Florida Public Service Commission May 21, 2001 Page 2

If you have any questions or need any further information or documentation, please call the undersigned at (601) 856-7200.

Sincerely yours,

COPELAND, COOK, TAYLOR & BUSH, P.A.

By: R. Nash Neyland

RNN/acc

Enclosures

# \*\* FLORIDA PUBLIC SERVICE COMMISSION \*\*

### DIVISION OF REGULATORY OVERSIGHT CERTIFICATION SECTION

Application Form for Authority to Provide Interexchange Telecommunications Service Between Points Within the State of Florida

#### Instructions

- This form is used as an application for an original certificate and for approval of assignment or transfer of an existing certificate. In the case of an assignment or transfer, the information provided shall be for the assignee or transferee (See Page 16).
- <u>Print or Type</u> all responses to each item requested in the application and appendices. If an item is not applicable, please explain why.
- Use a separate sheet for each answer which will not fit the allotted space.
- Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of \$250.00 to:

Florida Public Service Commission Division of Records and Reporting 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6770

Note: **No filing fee is required** for an assignment or transfer of an existing certificate to another company.

• If you have questions about completing the form, contact:

Florida Public Service Commission Division of Regulatory Oversight Certification Section 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6480

FORM PSC/CMU 31 (12/96) Required by Commission Rule Nos. 25.24-470, 25-24.471, and 25-24.473, 25-24.480(2).

1

DOCUMENT VENDER BATE

010822-11

07115 JUN-75

- 1. This is an application for  $\sqrt{}$  (check one):
  - () **Original certificate** (new company).
  - (x) Approval of transfer of existing certificate: Example, a non-certificated company purchases an existing company and desires to retain the original certificate of authority.
  - () Approval of assignment of existing certificate: Example, a certificated company purchases an existing company and desires to retain the certificate of authority of that company.
  - () **Approval of transfer of control:** <u>Example</u>, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.
- 2. Name of company:

Advantage Group of Florida Communications, LLC

3. Name under which applicant will do business (fictitious name, etc.):

Advantage Group of Florida Communications, LLC

4. Official mailing address (including street name & number, post office box, city, state, zip code):

7850 Stage Hills Blvd., Suite 102

Bartlett, TN 38133

5. Florida address (including street name & number, post office box, city, state, zip code):

315 Seagrave, Daytona Beach, Florida 32114-3142

Select type of business your company will be conducting  $\sqrt{(\text{check all that apply})}$ :

(x) Facilities-based carrier - company owns and operates or plans to own and operate telecommunications switches and transmission facilities in Florida.

6.

- (x) **Operator Service Provider** company provides or plans to provide alternative operator services for IXCs; or toll operator services to call aggregator locations; or clearinghouse services to bill such calls.
- (x) **Reseller** company has or plans to have one or more switches but primarily leases the transmission facilities of other carriers. Bills its own customer base for services used.
- (X) Switchless Rebiller company has no switch or transmission facilities but may have a billing computer. Aggregates traffic to obtain bulk discounts from underlying carrier. Rebills end users at a rate above its discount but generally below the rate end users would pay for unaggregated traffic.
- () **Multi-Location Discount Aggregator** company contracts with unaffiliated entities to obtain bulk/volume discounts under multi-location discount plans from certain underlying carriers, then offers resold service by enrolling unaffiliated customers.
- (x) **Prepaid Debit Card Provider** any person or entity that purchases 800 access from an underlying carrier or unaffiliated entity for use with prepaid debit card service and/or encodes the cards with personal identification numbers.
- 7. Structure of organization;

(		) Individual	(	) Corporation
(		) Foreign Corporation	(	) Foreign Partnership
(		) General Partnership	(	) Limited Partnership
(	х	) Other <u>limited liability</u>	compa	iny

8. **If individual,** provide:

Name: <u>N/A</u>	 
Fitle:	 
Address:	
City/State/Zip:	

Telephone No.:	Fax No.:
Internet E-Mail Address:_	
Internet Website Address:	

- 9. <u>If incorporated in Florida</u>, provide proof of authority to operate in Florida:
  - (a) The Florida Secretary of State Corporate Registration number:
- 10. **If foreign corporation,** provide proof of authority to operate in Florida:
  - (a) The Florida Secretary of State Corporate Registration number: N/A
- 11. <u>If using fictitious name-d/b/a</u>, provide proof of compliance with fictitious name statute (Chapter 865.09, FS) to operate in Florida:
  - (a) The Florida Secretary of State fictitious name registration number: N/A
- 12. <u>If a limited liability partnership</u>, provide proof of registration to operate in Florida:
  - (a) The Florida Secretary of State registration number: <u>N/A</u>

13. <u>If a partnership</u>, provide name, title and address of all partners and a copy of the partnership agreement.

Title	*
Addı	'ess:
City/	State/Zip:
Teler	ohone No.: Fax No.:
	net E-Mail Address:
Inter	net Website Address:
Ifaf	limited liability company oreign limited partnership, provide proof of compliance with the foreig
	ed partnership statute (Chapter 620.169, FS), if applicable.
(0)	
(a)	The Florida registration number: <u>M0100000657</u>
· · ·	The Florida registration number:       M0100000657         de F.E.I. Number (if applicable):       62–1847083
Provi	
Provi Provi	de <b>F.E.I. Number</b> (if applicable): <u>62–1847083</u>
Provi	<ul> <li>de F.E.I. Number (if applicable): 62–1847083</li> <li>de the following (if applicable):</li> <li>Will the name of your company appear on the bill for your services?</li> </ul>
Provi Provi (a) (b)	<ul> <li>de F.E.I. Number (if applicable): <u>62-1847083</u></li> <li>de the following (if applicable):</li> <li>Will the name of your company appear on the bill for your services? (x) Yes () No</li> <li>If not, who will bill for your services?</li> </ul>
Provi Provi (a) (b) <b>Nam</b>	<ul> <li>de F.E.I. Number (if applicable): 62-1847083</li> <li>de the following (if applicable):</li> <li>Will the name of your company appear on the bill for your services? (x ) Yes ( ) No</li> </ul>
Provi (a) (b) <b>Nam</b> <b>Title</b>	<ul> <li>de F.E.I. Number (if applicable): 62-1847083</li> <li>de the following (if applicable):</li> <li>Will the name of your company appear on the bill for your services?</li> <li>(x) Yes () No</li> <li>If not, who will bill for your services?</li> </ul>
Provi Provi (a) (b) Name Title: Addr	<pre>de F.E.I. Number (if applicable): 62-1847083 de the following (if applicable):    Will the name of your company appear on the bill for your services?         (x ) Yes ( ) No    If not, who will bill for your services? e:</pre>

14.

15.

16.

(c) How is this information provided?

		N/A
-,	33.71	

17. Who will receive the bills for your service?

(x) Residential Customers	( x) Business Customers
(🖌) PATs providers	(🗙) PATs station end-users
(x) Hotels & motels $(x)$ Hotel & mote	el guests
(✗) Universities	( <b>x</b> ) Universities dormitory residents
(X) Other: (specify) <u>Commence</u>	<u>·</u>

18. Who will serve as liaison to the Commission with regard to the following?

(a) <u>The application</u>:

Name: R. Nash Neyland

Title: Attorney

Address: 200 Concourse, Suite 200, 1062 HighlandColony Parkway City/State/Zip:\_\_\_\_\_Ridgeland, MS\_\_\_\_\_39157

 Telephone No.:
 (601)
 856-7200
 Fax No.:
 (601)
 856-7626

 Internet E-Mail Address:
 nneyland@cctb.com

 Internet Website Address:
 www.cctb.com

(b) Official point of contact for the ongoing operations of the company:

Name: Michael D. Boger, Sr.

Title: President

Address: 7850 Stage Hills Blvd., Suite 102 City/State/Zip: Bartlett, TN 38133

(c) <u>Complaints/Inquiries from customers:</u>

Name: Michael D. Boger, Sr.

Title: President

Address:7850 Stage Hills Blvd., Suite 102City/State/Zip:Bartlett, TN 38133

Telephone No.:(901)384-9100Fax No.:(901)385-7020Internet E-Mail Address:mbogersr@concentric.netInternet Website Address:

- 19. List the states in which the applicant:
  - (a) has operated as an interexchange telecommunications company.

None

(b) has applications pending to be certificated as an interexchange telecommunications company.

None

FORM PSC/CMU 31 (12/96) Required by Commission Rule Nos. 25.24-470, 25-24.471, and 25-24.473, 25-24.480(2).

(c)	is certificated to operate as an interexchange telecommunications company.
None	
(d)	has been denied authority to operate as an interexchange telecommunications company and the circumstances involved.
None	2
(e) None	has had regulatory penalties imposed for violations of telecommunications statutes and the circumstances involved.
(f)	has been involved in civil court proceedings with an interexchange carrier, local exchange company or other telecommunications entity, and the circumstances involved.
None	

20. Indicate if any of the officers, directors, or any of the ten largest stockholders have previously been:

(a) adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, <u>please</u> <u>explain</u>.

No

(b) an officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

No\_\_\_\_\_

21. The applicant will provide the following interexchange carrier services  $\sqrt{}$  (check all that apply):

a.\_\_\_\_\_ MTS with distance sensitive per minute rates

Method of access is FGA
 Method of access is FGB
 Method of access is FGD
 Method of access is 800

b.\_\_\_\_ MTS with route specific rates per minute

 \_\_\_\_\_\_ Method of access is FGA

 \_\_\_\_\_\_ Method of access is FGB

 \_\_\_\_\_\_ Method of access is FGD

 \_\_\_\_\_\_ Method of access is 800

c. X MTS with statewide flat rates per minute (i.e. not distance sensitive)

Method of access is FGA
Method of access is FGB
Method of access is FGD
Method of access is 800
d MTS for pay telephone service providers
e. Block-of-time calling plan (Reach Out
Florida, Ring America, etc.).
f 800 service (toll free)
g WATS type service (bulk or volume discount)
Method of access is via dedicated facilities
Method of access is via switched facilities
h Private line services (Channel Services) (For ex. 1.544 mbs., DS-3, etc.)
(For ex. 1.344 mos., DS-3, etc.)
IX Travel service
Method of access is 950
▲ Method of access is 800
j 900 service
k Operator services
Available to presubscribed customers
$\mathbf{X}$ Available to non presubscribed customers (for example, to
patrons of hotels, students in universities, patients in hospitals).
Available to inmates

1. Services included are:

★Station assistance★Person-to-person assistance★Directory assistance★Operator verify and interrupt★Conference calling

22. Submit the proposed tariff under which the company plans to begin operation. Use the format required by Commission Rule 25-24.485 (example enclosed).

The tariff currently on file for Daytona Telephone Company (IXE #5796) will be the tariff for Advantage Group of Florida Communications, LLC. Because Advantage Group has been formed as a part of an internal reorganization of Daytona Telephone the purpose of which is to change its type of entity from a corporation to a limited liability company, and to change its name. For all intents and purposes Advantage Group is the same as Daytona Telephone Company with the same officers, office and business. Submit the following:

**A. Managerial capability;** give resumes of employees/officers of the company that would indicate sufficient managerial experiences of each.

**B.** Technical capability; give resumes of employees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance.

# C. Financial capability.

23.

The application <u>should contain</u> the applicant's audited financial statements for the most recent 3 years. If the applicant does not have audited financial statements, it shall so be stated.

The unaudited financial statements should be signed by the applicant's chief executive officer and chief financial officer <u>affirming that the financial statements are true and</u> <u>correct</u> and should include:

- 1. the balance sheet;
- 2. income statement; and
- 3. statement of retained earnings.

**NOTE**: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

Further, the following (which includes supporting documentation) should be provided:

1. <u>A written explanation</u> that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.

2. <u>A written explanation</u> that the applicant has sufficient financial capability to maintain the requested service.

3. <u>A written explanation</u> that the applicant has sufficient financial capability to meet its lease or ownership obligations.

\*All of the above requested information is of record with the Florida Public Service Commission with respect to Daytona Telephone Company (CLEC #5736, IXE #5796 and Pay Phone #6006). Applicant has been formed in connection with an internal reorganization of Daytona Telephone Company. The sole purpose of such reorganization is to change the type of entity of Daytona Telephone Company from a corporation to a limited liability company and to change its name to Advantage Group of Florida Communications, LLC. For all intents and purposes Applicant will be continuing the telecommunications services of Daytona Telephone Company from the same offices and with the same management and staff.

# THIS PAGE MUST BE COMPLETED AND SIGNED

# APPLICANT ACKNOWLEDGMENT STATEMENT

- 1. **REGULATORY ASSESSMENT FEE:** I understand that all telephone companies must pay a regulatory assessment fee in the amount of <u>.15 of one percent</u> of its gross operating revenue derived from intrastate business. Regardless of the gross operating revenue of a company, a minimum annual assessment fee of \$50 is required.
- 2. **GROSS RECEIPTS TAX:** I understand that all telephone companies must pay a gross receipts tax of <u>two and one-half percent</u> on all intra and interstate business.
- **3. SALES TAX:** I understand that a seven percent sales tax must be paid on intra and interstate revenues.
- **4. APPLICATION FEE:** I understand that a non-refundable application fee of \$250.00 must be submitted with the application.

<u>UTILITY OFFICIAL:</u>	ADVANTAGE GROUP	OF FLORIDA COMMUN	ICATIONS, LLC
Michael D. Boger, Sr.		Michael	DArau &
Print Name		Signature	. 1 0

President Title

(901) 384–9100 Telephone No. 05/31/01 Date

(901) 385-7020 Fax No.

Address:	7850 Stage Hills Blvd., Suite 102
	Bartlett, TN 38133

### THIS PAGE MUST BE COMPLETED AND SIGNED

# **CUSTOMER DEPOSITS AND ADVANCE PAYMENTS**

A statement of how the Commission can be assured of the security of the customer's deposits and advance payments may be provided in one of the following ways (applicant, please  $\sqrt{}$  check one):

- $\begin{pmatrix} & X \end{pmatrix}$  The applicant will **not** collect deposits nor will it collect payments for service more than one month in advance.
- The applicant intends to collect deposits and/or advance payments for more than one month's service and will file and maintain a surety bond with the Commission in an amount equal to the current balance of deposits and advance payments in excess of one month.

(The bond must accompany the application.)

<u>UTILITY OFFICIAL:</u>	ADVANTAGE GROUP OF FLORIDA COMMUNICATIONS, LLC
Michael D. Boger, Sr. Print Name	Micha Abra
President Title	 Date / 21 / 0 /
(901) 384-9100	(901) 385-7020
Telephone No.	Fax No.
Address:7850 Stag	e Hills Blvd., Suite 102
Bartlett,	TN 38133

#### THIS PAGE MUST BE COMPLETED AND SIGNED

# AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide interexchange telecommunications service in the State of Florida. I have read the foregoing and declare that, to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

Further, I am aware that, pursuant to Chapter 837.06, Florida Statutes, "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s. 775.083."

UTILITY OFFICIAL:

President

Title

ADVANTAGE GROUP OF FLORIDA COMMUNICATIONS, LLC

Michael D. Boger, Sr. Print Name

Mchaf Afrigen on

(901) 384–9100 Telephone No.

<u>(901)</u> 385–7020 Fax No.

Address: 7850 Stage Hills Blvd., Suite 102

Bartlett, TN 38133

#### CURRENT FLORIDA INTRASTATE SERVICES

Applicant has ( ) or has not (  $\mathbf{x}$  ) previously provided intrastate telecommunications in Florida.

If the answer is <u>has</u>, fully describe the following:

a) What services have been provided and when did these services begin?

b)	If the services are not currently of	fered, when were they discontinued?
UTILITY OF	ADVANIAGE GIGOI C	F FIGRIDA COMMUNICATIONS, LLC
Print Name		Signature
President Title		<u>OS / 31/01</u> Date
(901) 384-91	00	(901) 385-7020
Telephone No.	<u></u>	Fax No.
Address: 7850 Stage Hills Blvd., Suite 102		
Bartlett, TN 38133		
	· · · · · · · · · · · · · · · · · · ·	

CERTIFICATE TRANSFER, OR ASSIGNMENT STATEMENT

#### I, (Name) Michael D. Boger, Sr.

(Title) President and Chairman of the Board of Organy (Name of Company)

and current holder of Florida Public Service Commission Certificate Number

# <u>5796</u>, have reviewed this application and join in the petitioner's request for a:

( x ) transfer

( ) assignment

of the above-mentioned certificate.

UTILITY OFFICIAL:

DAYTONA TELEPHONE COMPANY

Michael D. Boger, Sr. Print Name

President/Chairman

Michine forge a Signature

<u>(901) 384–9100</u> Telephone No. (901) 385--7020 Fax No.

Address: 7850 Stage Hills Blvd., Suite 102

Bartlett, TN 38133