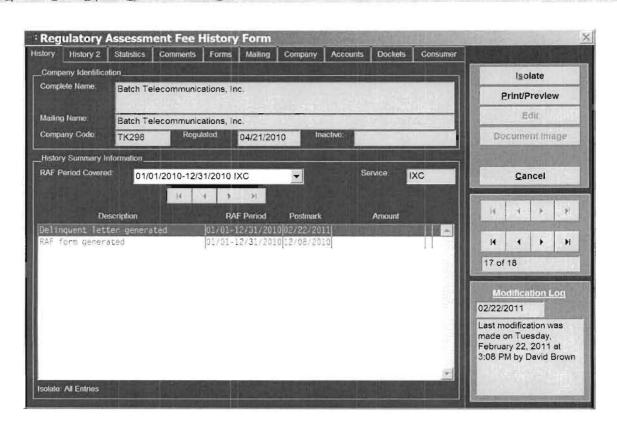
		,			LISH DOCKET	RECEIVED-FPSC	
Data	F/47/2044	(Please type or prin	Docket No.:	plus 1 copy with CLK.)	11 MAY 17 PM 3: 29	
Date:			5::: 015		1 110110 11	IIMAT I I III 3. 23	
1. From Staff / Division:		Division Of Regulatory Analysis/Toni Earnhart COMMISSION CLERK					
2. OPR:	Toni Earnhart, RAD CLERK						
3. OCR:	GCO						
4. Suggested Docket Title:				CC Registration No. TK298, issued to Batch arent first-time violation of Section 364.336, F.S., and ulatory Assessment Fees; Telecommunications			
5. Program/Module/Submo			dule Assignment:		A18a, A10		
6. Sugge	sted Docket	Mail L	.ist.				
a. Provide NAMES/ACRONYMS, if registered company.					☐ Provided as an Attac	chment	
Company	ovide COMF	PLETE tereste	d persons, if any,	ESS for all othe	Representatives (name a		
if applica	ble: (ir	nclude	address, if differe	nt from MCD):	Representatives (name a	and address):	
7. Check	one: 🗵	Sup	porting Documenta	ation Attached	☐ To be provided with	Recommendation	
Comment	s:						
A CR CL CD C CM			CUMENT NUMBER-				
PSC/CLK 010-C (Rev. 04/08)			03420 MAY 1	17 = G:12	010 RAF COMPLIANCE PAA CO N DOCKETCOM	MEMO\REQUEST TO ESTABLI PLIANCEIXCRAFfirstviolation.c	

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FPSC-COMMISSION CLERK

COMPANY IDENTIFICATION

Printed on 05/06/2011 at 17:05:31 by TJE

Complete Name: Batch Telecommunications, Inc.

Mailing Name: Batch Telecommunications, Inc.

Company Code: TK298 FEID Number: 75-3037070

RAF ACCOUNT FOR THE PERIOD 01/01/2010 THROUGH 12/31/2010

Reg. Date: 04/21/2010 Inactive Date:

Service: IXC - Interexchange Telephone

Received: No RAF Form

Status: Pending

Amended: No Extension: No Frozen: No Comments: No

Payment Count: 0 Payments Made to Date

Operating Rev: \$0.00 Interstate Rev: \$0.00

RAF Rate:

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Wednesday, December 8, 2010 at 1:01 PM by David Brown

IIVW UHHHAO

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X □ Agent □ Addressee		
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery		
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
TK298-10-0-D Batch Telecommunications, Inc. 1026 S.W. 144th Avenue Pembroke Pines, FL 33027-6162			
Pembloke Filles, 1 L 33027-0102	3. Service Type Certified Mail Registered Insured Mail C.O.D.		
1	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number 7006 01.	10 0003 1056 9077		
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540		