		(P			ISH DOCKET	C	13 APR	NEC!
Date:	4/30/2013			Docket No.:	130111-T.S	₽ ₹	30	HA.
1. From Staff / Division:		on:	Office Of Telecommunications/Toni Earnhart			P		
2. OPR:	Toni Earnhart, TEL					2	ö	-PS
3. OCR:	GCO						w	0
4. Suggested Docket Title:			Compliance investigation of cancelled STS Certificate No. 8631, issued to Biopass Medical Systems, Incorporated d/b/a DSL Express, for second-time violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.					
5. Program/Module/Submodule Assignment			ule Assignment:		A18a, A10			
6. Sugges	ted Docket	t Mail Li	st.					
a. Provide NAMES/ACRONYMS, if registe				ed company.	☐ Provided as an Atta	achment		
Company if applicat TS210	,	arties nclude a	ddress, if different	from MCD):	Representatives (name	and addres	ss):	
b. Pro Company if applicat	Code, In	OMPLETE NAME AND ADDRESS for all other Interested persons, if any, (include address, if different from MCD):			rs. (match representatives to companies) Representatives (name and address):			
7. Check o		Supp	orting Documentat	ion Attached	☐ To be provided with	h Recomme	endati	on

DECUMENT NUMBER-DATE

02311 APR 30 =

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DEL	IVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits. 	A. Signature X. Disting K B. Received by (Printed Name) DEST MY KNOWN burg.	□ Agent □ Addresse C. Date of Deliver 2/25//3
1. Article Addressed to: TS210-12-0-D DSL Express 7401 Wiles Road, Suite 121	D. la delivery address different from iter If YES, enter delivery address below	
Coral Springs, FL 33067-2038	3. Service Type Certified Mail Express Mai Registered Return Rece	I lpt for Merchandise
and it was an invited to the winds	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 7011 3	500 0001 5979 1461	

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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			
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			
1. Article Addressed to: TS210-12-0-D DSL Express 7401 Wiles Road, Suite 121	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No			
Coral Springs, FL 33067-2038	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.			
To the state of th	4. Restricted Delivery? (Extra Fee)			

COMMISSIONERS: RONALD A. BRISE, CHAIRMAN LISA POLAK EDGAR **ART GRAHAM** EDUARDO E. BALBIS Julie I. Brown

STATE OF FLORIDA



OFFICE OF THE GENERAL COUNSEL S. CURTIS KISER GENERAL COUNSEL (850) 413-6199

Public Serbice Commission

February 21, 2013

TS210-12-0-D DSL Express 7401 Wiles Road, Suite 121 Coral Springs, FL 33067-2038

Dear Certificate/Registration Holder:

The purpose of this letter is to inform you that the Commission has not received the 2012 Regulatory Assessment Fee (RAF) return and payment. As required by Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code (F.A.C.), you were mailed a RAF return form on December 15, 2012, and payment was due on January 30, 2013.

Because you are delinquent in payment, in addition to the RAF, which is 0.0016 of a company's intrastate revenues or a minimum fee of \$600, whichever is greater, the company must now pay late payment charges. The late payment charges, consisting of interest and penalty, are outlined on the reverse side of the RAF return form. If you have misplaced or require a copy of the 2012 RAF return form, please contact David Brown or Valorie Moore at the numbers listed below or via e-mail.

If payment is not postmarked within 15 calendar days of receipt of this notice, as evidenced by the certified mail reciept, Rule 25-4.0161, F.A.C., automatically imposes a penalty of \$500, \$1,000, or \$2,000, in addition to the interest and penalty listed in the preceding paragraph. The penalty is based on the number of prior dockets against a company for violation of the RAF rule. For example, if a company has no prior dockets and fails to pay in accordance with this notice, it automatically will be assessed a \$500 penalty. For one prior docket, it automatically will be assessed a \$1,000 penalty and for two, a \$2,000 penalty. For a third docket, staff will submit a recommendation to the Commission seeking cancellation of the company's certificate or cancellation of its tariff and removal from the register.

Therefore, it is very important that you pay the 2012 Regulatory Assessment Fee plus late payment charges immediately. If you have any questions, please contact David Brown at (850) 413-6267 or Valorie Moore at (850) 413-6275 or via e-mail at dbrown@psc.state.fl.us or vmoore@psc.state.fl.us.

S. Curtis Kiser

Office of the General Counsel

Fiscal Services Section CC:





