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July 27, 2021

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FILED 7/28/2021 DOCUMENT NO. 08373-2021 FPSC - COMMISSION CLERK

Adam Teitzman, Director Office of the Commission Clerk Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

REDACTED

RE: Confidential- Regulatory Assessment Fee Returns for Six Months Ended June 30, 2021 and Amended Regulatory Assessment Fee Returns for Six Months Ended December 31, 2020

Dear Mr. Teitzman:

Enclosed in a sealed envelope for confidential filing please find the Florida Regulatory Assessment fee returns for the six months ended June 30, 2021 for the following companies containing confidential information:

Embarq Florida, Inc. d/b/a CenturyLink - TL727-21-T-1-R

Check No. 0012146635

CenturyLink Communications, LLC d/b/a Embarq Communications – TX273-21-T-1-R

Check No. 0012146636

Level 3 Communications, LLC - TX238-20-T-2-R

Check No. 004070181

Level 3 Telecom of Florida, LP - TA013-21-T-1-R

Check No. 004070180

2021 JUL 28 AM 9: 39

Also Enclosed in a sealed envelope for confidential filing please find the AMENDED Florida Regulatory Assessment Fee Returns for July 1, 2020 to December 31, 2020 for Level 3 Communications, LLC – TX238-20-T-2-R and for Level 3 Telecom of Florida, LP – TA013-20-T-2-R containing confidential information.

The Company is requesting confidential treatment of this report pursuant to §364.183, Florida Statutes. This Notice requires that the information be treated as confidential while on file at the Florida Public Service Commission. Please acknowledge receipt and filing of the above by stamping the duplicate copy of this letter and returning the same to this writer. Thank you for your assistance in this matter.

If you have any questions, please contact Mary Garris as (318)388-9453 or via e-mail at mary.garris@centurylink.com.

Sincerely,

Christie P. Mason

Director - State and Local Government Affairs

Attachments

COM ____

AFD

APA ____

ECO ___

ENG _

GCL __

1 Set-reducted

Affairs 132 N.

132 N. Calhoun Street Tallahassee, FL 32301 Tel: (850) 599-1073 Christie.A.Pontis@lumen.com

Director State & Local Government

Christie P. Mason

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 07/30/2021 Local Telephone Service Provider Regulatory Assessment Fee Return

			•		
		Florida Public Se	rvice Commission	FOR PS	C USE ONLY
STATL	JS:	(See Filing Instruction	ons on Beck of Form)	Check#	•
x	Actual Return Estimated Return Amended Return	TL727-21-T-1-R CenturyLink 132 N. Calhoun St., Suite 3			08-03-001 003001
PEDIO	D COVERED:	Tallahassee, FL 32301-1598		3 3	E
	11/2021 TO 06/30/2021				06-03-001 004011
					1
				Postmark Date	
		Please Complete Selow If Officia	i Mailing Address Has Changed	Initials of Pro	operer
	(Name of company)				
			(Address)	(City / State)	(Zip)
LINE NO.			FLOR	TOTAL IDA GROSS TNG REVENUE INT	RASTATE REVENUE
1.	Local Service Revenues		\$		TOTALE REVENUE
2.	Network Access Revenues				
3.	Long Distance Network Servi	ces Revenues			
4.	Miscellaneous Revenues				
5.	TOTAL REVENUES		\$		
6.	LESS: Amounts Paid to Othe	r Telecommunications Companies(1)			
7.	NET INTRASTATE OPERAT	ING REVNEUE for Regulatory Assessm	nent Fee Calculation (Line 5 less	\ Line 6)	
8. 9.	Regulatory Assessment Fee I	Oue (Multiple Line 7 by 0.0016. If more	th		
10. 11.		9 "3. Fallure to file by Due Date" on back			
12.	TOTAL AMOUNT DUE (Add	lines 8 through 11)		s	

	(1) These amounts must be (2) Regardless of the gross Section 364.336, Floride	intrastate only and must be verifiable (s operating revenue of a company, a mini or Statues.	ee "2. Fees" on back). mum annual regulatory assessm	ent feee of \$600 shall be imposed as	provided in
i, ti a true public se	he undersigned owner/officer of and correct statement. I am a swant in the performance of his offici	the above-named company, have read aware that pursuant to Section 837.06, at duty shall be guilty of a misdemeenor of ti	i the foregoing and declare the Florida Statues, whoever knowl he second degree.	at to the best of my knowledge a ngly makes a false statement in w	and belief the above information niting with the intent to mislead
	Isi Many Garris		Manager-Regulation/ Flaures (see date)		
	(Signature of Company C	Official)	Manager-Regulatory Finance (per deleg (Title		7/22/2021 (Date)
	Penny S. Nuger (Preparer of Form - Please P	rint Name)	Telephone Number (310	8) 330-6409 Fex Number	(318) 388- 9 991
			F.E.I. No. 59-0248365		(4.07,000,000)

PSC/TEL 159 (12/11) Rule 25-4.0161, F.A.C

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FLED ON OR BEFORE 07/1/2021

Local Telephone Service Provider Regulatory Assessment Fee Return

		Florida Public Se	ervice Commission		FOR PSC	USE ONLY
STATUS:		(See Filing Instructi	(See Filing Instructions on Back of Form)		Check#	
X Actual Return TX273-21-T-1-R Estimated Return Embarq Communicati Amended Return 132 N. Calhoun St., Si		TX273-21-T-1-R Embarq Communications 132 N. Calhoun St., Ste 3 Tallahassee, FL 32301-1598			\$ \$ \$	08-03-001 003001 E P 08-03-001 004011
		Pieese Complete Below If Offici	ał Mailing Address Has Ch	anged	Postrnark Date Initials of Prepo	arer
	(Name of company)		(Address)		(City / State)	(Zip)
LINE NO. 1. 2. 3. 4. 5. 6. 9. 10. 11. 12.	NET INTRASTATE OPERAT Regulatory Assessment Fee Penalty for Late Payment (se Interest for Late Payment (se Extension Payment Fee (see TOTAL AMOUNT DUE (Add	er Telecommunications Companies(1) FING REVNEUE for Regulatory Assess Due (Multiple Line 7 by 0.0016. If mone "3. Failure to File by Due Date" on bace "3. Failure to file by Due Date" on bace "4. Extension" on back)	e than \$600, enter amo ack) ck.)	ount. If less, enter \$600	\$	ASTATE REVENUE
	(2) Regardless of the gross Section 364.336, Florid	8 Operating revenue of a company a m	(see "2. Fees" on bac inimum annual regulat	k). Ory assessment feee of	\$600 shall be imposed	as provided in
i, the is a true of a public sen	undersigned owner/officer of	the above-named company, have reasoners that pursuant to Section 837.06, iall duty shall be guilty of a misdemeanor of t	he second degree.	declare that to the best ver knowingly makes a ce (per delegated authority of: (Title)	false statement in writ	d belief the above information ing with the intent to mislead 7/22/2021 (Date)
	Penny S. Nuge (Preparer of Form - Please i		Telephone Number F.E.I. No. 04-61417	(318) 330-6409	Fax Number	(318) 388-9991

PSC/RAD 159 (12/11) Rule 25-4.0161, F.A.C

TO AVOID PENALTY AND INTEREST CHARGES THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 7/30/2021 Local Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Se	ervice Commission	FOR PSC USE	ONLY
STATUS: (See Filing Instruction	ons on Back of Form)	Check#	
X Actual Return Estimated Return Amended Return PERIOD COVERED: 01/01/2021 TO 06/30/2021 TX238-21-T-1-IR Level 3 Communications, LLC 132 N. Calhoun St., Ste 3 Tailahassee, FL 32301-1598		\$ \$ \$	06-03-001 003001 E P 06-03-001 004011
Please Complate Below if Officia	· 	Postmerk Date Initials of Preparer	
(Name of company)	(Address)	(City / State)	(Zip)
LINE NO. 1. Local Service Revenues	TOTAL FLORIDA G OPERATING R	ROSS	TATE REVENUE
Network Access Revenues	\$	<u> </u>	
Long Distance Network Services Revenues			
4. Miscellaneous Revenues			
5. TOTAL REVENUES			
LESS: Amounts Paid to Other Telecommunications Companies(1)	·	*	
7. NET INTRASTATE OPERATING REVNEUE for Regulatory Assesse		(
8. Regulatory Assessment Fee Due (Multiple Line 7 by 0.0016. If more 9. Penalty for Late Payment (see "3. Failure to File by Due Date" on baci 10. Interest for Late Payment (see "3. Failure to file by Due Date" on baci 11. Extension Payment Fee (see "4. Extension" on back)	than \$600, enter amount. If less, enter	·	
12. TOTAL AMOUNT DUE (Add lines 8 through 11)		\$	
 (1) These amounts must be <u>intrastate only</u> and must be verifiable ((2) Regardless of the gross operating revenue of a company, a min Section 364.336, Florida Statues. 	see "2. Fees" on back). Imum annual regulatory assessment fee	e of \$600 shall be imposed as provi	kled in
t, the undersigned owner/officer of the above-named company, have rea a true and correct statement. I am aware that pursuant to Section 837.06 public servant in the performance of his official duty shall be guilty of a misdemeanor of itsi Many Garris.	the second degree.	Nakes a raise statement in writing	belief the above information with the intent to mislead
(Signature of Company Official)	Manager-Regulatory Finance (per delegated au Senior Manager - Regulator)	thority of SVP and Controller) Finance	7/22/2021 (Date)
			, -
Penny S, Nugent (Preparer of Form - Please Print Name)	Telephone Number 318-330-	6409 Fax Number	(318) 388-9991
	F.E.I. No. <u>47-0807040</u>	<u> </u>	

PSC/TEL 159 (12/11) Rule 25-4.0161, F.A.C

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 7/30/2021 Local Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Se	rvice Commission	FOR PSC USE (ONLY
STATUS: (See Filing Instruction	ons on Back of Form)	Checks	
X Actual Return Estimated Return Amended Return Amended Return PERIOD COVERED: 01/01/2021 TO 06/30/2021 TA013-21-T-1-R Level 3 Telecom of Florida, LP 132 N. Calhoun St., Ste 3 Tallahassee, FL 32301-1598		\$ \$ \$	06-03-001 003001 E P 06-03-001 004011
Please Complete Below If Official	i Mailing Address Has Changed	Postmark Date Initials of Preparer	
(Name of company)	(Address)	(City / State)	(Zip)
LINE NO.	TOTAL FLORIDA GROS OPERATING REVE		ATE REVENUE
Local Service Revenues	\$	S 8	*:
2. Network Access Revenues			
3. Long Distance Network Services Revenues			
4. Miscellaneous Revenues			
5. TOTAL REVENUES	\$	\$	
6. LESS: Amounts Paid to Other Telecommunications Companies(1)		(
7. NET INTRASTATE OPERATING REVNEUE for Regulatory Assessm	nent Fee Calculation (Line 5 less Line 8)	\$	
8. Regulatory Assessment Fee Due (Multiple Line 7 by 0.0016. If more 9. Penalty for Late Payment (see "3. Failure to File by Due Date" on back 10. Interest for Late Payment (see "3. Failure to file by Due Date" on back 11. Extension Payment Fee (see "4. Extension" on back)	than \$600, enter amount. If less, enter \$60	00.)(2)	1
12. TOTAL AMOUNT DUE (Add lines 8 through 11)		\$	
 (1) These amounts must be <u>intrastate only</u> and must be verifiable (s (2) Regardless of the gross operating revenue of a company, a mini Section 364.336, Fiorida Statues. 	see "2. Fees" on back). mum annual regulatory assessment feee of	(\$600 shall be imposed as provide	ed in
I, the undersigned owner/officer of the above-named company, have rea is a true and correct statement. I am aware that pursuant to Section 837.06 a public servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in the performance of his official duty shall be guilty of a misdemeanor of the servant in t	he second degree. Manager-Regulatory Finance (per delegated authorit	es a raise statement in writing	elief the above information with the intent to mislead
e e e e e e e e e e e e e e e e e e e	(Title)		(Date)
Penny S, Nugent (Preparer of Form - Please Print Name)	Telephone Number 318-330-640 F.E.I. No. 08-1363374	9 Fax Number	(318) 388-9991

PSC/TEL 159 (12/11) Rule 25-4.0161, F.A.C