APPLICATION TO AMEND A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY FOR CABLE AND/OR VIDEO SERVICE

1) Name of Certificate holder: Baldwin County Internet / DSS
Service, L.L.C. Franchise & CVOT-0002

2) Address of Certificate holder:

3) Statement of Amendment(s):
   a) Change in Service Area. Notification of Commencement is required within five business days after first providing service in each additional area. Please provide a description of the new service area consistent with s. 610.104(2)(e) 5, Florida Statutes, and effective date of Commencement of Operations. (Please include all service areas. List existing areas first and new areas last.)

   b) Notice of Transfer of Interest. Notification is required within fourteen business days following completion of transfer. Please provide the name and address of any successor in interest.

   X c) Other: (change of address or contact person) see attached

   d) Notice to Terminate Service.
   Effective Date: 

Division of Corporations, Cable and/or Video Franchising
Post Office Box 5678, Tallahassee, Florida 32314

CF04 (07/07)
November 20, 2008

Via Overnight Mail

Division of Corporations
Cable and/or Video Franchising
The Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CATV Franchise No. CV07-0002

RE: Notice by Baldwin County Internet/DSSI Service, L.L.C. of Changes in Contact Information for the Company

Original and 2 copies

In accordance with Florida law and rules, Baldwin County Internet/DSSI Service, L.L.C., Statewide CATV Franchise No. CV07-0002, is providing notice of changes in contact information for the Company. Effective immediately, the following are contacts for the Company in the indicated areas:

The headquarters address for BCI is:
Mailing Address: P.O. Box 1245, Gulf Shores, AL 36547
Physical Address: 1240 Commerce Drive, Suite A, Gulf Shores, AL 36542

Primary Contact for Overall Regulatory, Reporting, and Legal Matters:
R. Scott Seab, Vice President - Regulatory Affairs
Address: 1644 Plowman Dr, Monument, CO 80132
Telephone: 719-233-5138
Fax No.: 509-272-5383
Email: scott.seab@cnxntech.com

Contact for Regulatory, Legal, Tax, Fee, and Reporting Matters:
Baldwin County Internet/DSSI Service, L.L.C.
Regulatory Department
Attn: Tammy Siegner
Address: 111 Corning Road, Suite 250, Cary, NC 27518
Telephone: 919-535-7422
Fax No.: 919-882-1125
Email: Karen.welch@cnxntech.com
For Customer Service and Commission Complaints, contact:
Julia Dantin, General Manager, Customer Service
Address: 1240 Commerce Drive, Suite A, Gulf Shores, AL 36542
Telephone: 251-224-0928
Fax No.: 251-224-0861
Email: Julia.dantin@cnxntech.com

For Emergency Reporting (E911) or Critical Network Problems which require immediate action or assistance, contact:
Eric Landry
NOC (Network Operations Center) Director
Address: 1240 Commerce Drive, Suite A, Gulf Shores, AL 36542
Telephone: 251-224-0912
Fax: 251-224-0910
Email: eric.landry@cnxntech.com

If none of the above apply, the Overall Contact is now the new Company President (although Jeffery L. Hathaway remains the Chief Executive Officer):
Harold R. (Harry) Bailes, President
1240 Commerce Drive, Suite A, Gulf Shores, AL 36542
Telephone 919-454-4176, Fax 919-882-9338
Email: harry.bailes@beyondcommunications.net

In order to provide complete contact information in one document, the following are company-wide contacts:

Principal office/business office telephone number: 251-224-0996
Principal office/business office fax number: 251-224-0830
Website address: www.dssite.com
E-mail address: info@dssite.com
Toll-free customer service telephone number: 877-668-1795

Any questions regarding this filing may be directed to Scott Seab at the above contact numbers. Thank you for your assistance in this matter.

Sincerely,

[Signature]
Michael N. Giles
Consultant for
Baldwin County Internet/DSSI Service, L.L.C.
(Requestor's Name)

__________________________

(Address)

__________________________

(Address)

__________________________

(City/State/Zip/Phone #)

☐ PICK-UP  ☐ WAIT  ☐ MAIL

__________________________

(Business Entity Name)

__________________________

(Document Number)

Certified Copies ______ Certificates of Status ______

Special Instructions to Filing Officer:

__________________________

Office Use Only