

Department of State

## Certificate of Franchise Authority

I certify that Knology, Inc., identification number CV08-0020 issued on 1/9/2008, is hereby granted authority to provide cable and/or video service in the following service area(s) as amended on 6/10/2008:

Service areas are described in the attached true and correct copy of the document.

I further certify that authority to construct, maintain, and operate facilities through, upon, over, and under any public right-of-way or waters, subject to the applicable governmental permitting or authorization from the Board of Trustees of the Internal Improvement Trust Fund, is hereby granted.

This grant of authority is subject to lawful operation of the cable or video service by the applicant or its successor in interest.

> Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capitol, this the Tenth day of June, 2008

CR2EO22 (01-07)

Secretary of State



## RECEIVED

2008 JUN -9 PM 12: 45

CABLE AND/OR VIDEO FRANCHISING DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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

Name of Certificate holder: Knology, Inc.

Í	
2)	Address of Certificate holder: 1241 O.G. Skinner Drive, West Point, GA 31833
2)	
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.)
a The area	and new areas last.) consisting of the corporate limits of the City of Dunedin, Florida, as its border may be changed from time to time. This area is currently being
served by Kr	nology Broadband of Florida, Inc. under a franchise agreement with the City of Dunedin. The entity providing service in this area under the state
	cate of franchise authority shall be Knology Broadband of Florida, Inc. rporated areas of Bay County, Florida. This area is currently being served by Knology of Florida, Inc. under a license issued by the Board of
County Com	missioners of Bay County, Florida. The entity providing service in this area under the state issued certificate of franchise authority shall be
Knology of F	lorida, Inc. consisting of the corporate limits of the City of Seminole, Florida, as its border may be changed from time to time. The area is currently being
served by Kr	nology Broadband of Florida, Inc. under a franchise agreement with the City of Seminole. The entity providing service in this area under the
	certificate of franchise authority shall be Knology Broadband of Florida, Inc. consisting of the corporate limits of the City of Tarpon Springs, Florida, as its border may be changed from time to time. The area is currently
being served	by Knology Broadband of Florida, Inc. under a franchise agreement with the City of Tarpon Springs. The entity providing service in this area
	ate issued certificate of franchise authority shall be Knology Broadband of Florida, Inc. consisting of the corporate limits of the City of Largo, Florida, as its border may be changed from time to time. The area is currently being served
by Knology E	Broadband of Florida, Inc. under a franchise agreement with the City of Largo. The entity providing service in this area under the state issued
	franchise authority shall be Knology Broadband of Florida, Inc. consisting of the corporate limits of the City of Oldsmar, Florida, as its border may be changed from time to time. The area is currently being
served by Kr	nology Broadband of Florida, Inc. under a franchise agreement with the City of Oldsmar. The entity providing service in this area under the state cate of franchise authority shall be Knology Broadband of Florida, Inc.
ooded ooran	action numbered additionly state by Michael Controlled, Inc.
	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.
	c) Other: (change of address or contact person)
	d) Notice to Terminate Service.
	Effective Date:

1)



RECEIVED

2008 JUN -9 PM 12: 45

CABLE AND/UR VIDEO FRANCHISING DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

June 6, 2008

Ms. Melanie Solomon
Florida Department of State
Division of Corporations
Cable and/or Video Franchising
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Application to Amend State Issued Certificate of Franchise Authority and

Notice of Commencement of Service by Knology, Inc.,

Dear Ms. Solomon:

Knology, Inc., on behalf of itself and its subsidiaries, Knology Broadband of Florida, Inc. and Knology of Florida, Inc., (collectively "Knology") applied for and received a state issued Certificate of Franchise Authority to provide cable and/or video service in specified areas in Florida. Specifically, Knology was granted authority to provide service in Bay County, Florida, as well as the cities of Dunedin, Tarpon Springs, Seminole, and Largo, Florida. Enclosed is an Application to Amend the State Issued Certificate of Franchise Authority to include the additional area of the City of Oldsmar, Florida. Consistent with the requirements of Chapter 610.105(1), Knology is simultaneously filing written notice with the City of Oldsmar to make the City aware of Knology's application.

In addition to the foregoing, please accept this letter as official notice of commencement of service, pursuant to Chapter 610.104(2)(e)(7) and 610.104(6), in all areas covered by Knology's certificate, including the City of Oldsmar.

If you should have any questions or require further information regarding this amendment application, please don't hesitate to contact me directly at (706) 634-6713 or at <a href="mailto:Kathryn.Ford@knology.com">Kathryn.Ford@knology.com</a>.

Sincerely,

Kathryn E. Ford

Director of Legal Affairs

(Requestor's Name)	
(Address)	100130975131
(City/State/Zip/Phone #)	
(Business Entity Name)	06/09/0801022081 **35.00
· (Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only