



Department of State

Certificate of Franchise Authority

I certify that Atlantic Broadband Finance, LLC identification number CV07-0015 issued on 9/25/2007, is hereby granted authority to provide cable and/or video service in the following service area(s) as amended on 7/23/2013:

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 Twenty third day of July 2013.



CR2EO22 (1-11)

Ken Detzner
Ken Detzner
Secretary of State

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

- 1) Name of Certificate holder Atlantic Broadband Finance, LLC on behalf of its affiliate Atlantic Broadband (Miami), LLC _____
- 2) Address of Certificate holder: 1681 Kennedy Causeway, Miami Beach, FL 33141
- 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 areas. Please provide a description of the new service area consistent with s.610.104(2)(c)5 Florida Statutes, and effective date of Commencement of Operations. (Please include all service areas.) List existing areas first and new areas last. Use attached pages if necessary
- Please see attached list for both existing and new areas

☐ 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: _____

Bartlett Leber BARTLETTLEBER 7-8-13
Printed Name and Title Signature Date

Amendment to State Issued Certificate of Franchise Authority for Atlantic
Broadband (Miami) LLC

Question 3:

Existing: Miami-Dade County (CUID FL0529 and CUID FL0413), the municipal boundaries of the City of Miami Beach (CUID FL0406), the Town of Golden Beach (CUID FL0412), the City of North Bay Village (CUID FL0409), the Town of Bay Harbour Islands (CUID FL0407), the Town of Surfside (CUID FL0410), the Village of Bal Harbour (CUID FL0411) with the additional service areas of the municipal boundaries of the City of Sunny Isles Beach (CUID FL 1230), the City of Aventura (CUID FL 1231), the City of South Miami (CUID FL0914) and the Village of Pinecrest (CUID FL 1210), City of Miami, City of North Miami, City of North Miami Beach, Hallandale Beach, Indian Creek Village.

New: Miramar

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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