I certify that Dais Communications, identification number CV12-0030, issued on 02/03/2012, is hereby granted authority to provide cable and/or video service in the following service area(s):

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

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 Third day of February, 2012.

Kurt S. Browning
Secretary of State
APPLICATION FOR A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY TO PROVIDE CABLE AND/OR VIDEO SERVICE

A. Official name of the cable or video service provider:
   Dais Communications, LLC

B. Street address of the principal place of business of the cable and/or video service provider:
   4558 SW 35th Street, Orlando, FL 32811

C. Federal employer identification number or the Department of State’s document number:
   45-4148899

D. Name, address, and business telephone number of an officer, partner, owner, member, or manager as a contact person for the cable or video service provider to whom questions or concerns may be addressed:
   Name: Brenda Kincaid
   Title: Corporate Secretary
   Address: 4558 SW 35th Street, Orlando, FL 32811
   Business telephone number: 407-996-6251

E. Duly executed affidavit attached (notarized and signed by an officer, partner, owner or managing member).

This application and affidavit must be submitted with an application fee of $10,000.00 and an accompanying fee of $35.00 and mailed to the State-Issued Certificate of Franchise Authority for Cable and/or Video Service at the following address:

MAILING ADDRESS:
Cable and/or Video Franchising
Division of Corporations
PO Box 5678
Tallahassee, Florida 32314

STREET ADDRESS:
Cable and/or Video Franchising
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CF01 (6/07)
E. (State-Issued Cable Franchise)
STATE OF Florida
COUNTY OF Orange

AFFIDAVIT

I, Richard Pardy, am employed with Dais Communications, LLC in an official capacity as (officer, partner, owner, managing member) Officer and do hereby attest to the facts stated herein from my personal knowledge. I hereby swear and affirm that the following statements are true and correct:

1) The applicant is fully qualified under the provisions of Chapter 610, F.S., to file this application and affidavit for a certificate of franchise authority.
2) The applicant has filed or will timely file with the Federal Communications Commission all forms required by that agency in advance of offering cable or video services in this state.
3) The applicant agrees to comply with all applicable federal and state laws and regulations, to the extent such state laws and rules are not in conflict with or superseded by the provisions of Chapter 610, F.S., or other applicable state law.
4) The applicant agrees to comply with all the state laws and rules and municipal and county ordinances and regulations regarding the placement and maintenance of communications facilities in the public rights-of-way that are generally applicable to providers of communications services in accordance with s. 337.401, F.S.
5) The description of the service area consistent with s. 610.104 (2)(e) 5a & b, F.S., for which the applicant seeks a certificate of franchise authority is:

Orange

6) Applicant's principal place of business: Orlando, FL

Names of the applicant's principal executive officers: Richard W Pardy, James Zboril, Philip Keeping, Michael Voll

Street Address sufficient for purposes of Chapter 48, F.S.: 4558 SW 35th Street, Orlando, FL 32811

7) The applicant will file with the Department of State a notice of commencement of services within five business days after first providing services in each area described.
8) The applicant will notify the Department of State of any changes of address or contact person.
9) The applicant's systems shall comply with the Federal Communications Commission's rules and regulations of the Emergency Alert System.

Richard W Pardy, Managing Member
Printed Name and Title

Signature

Sworn to affirm and subscribe before me on this 31st day of January, 2012, by Richard Pardy (Name of Affiant)

Personal known OR □ Produced Identification
Type of Identification Produced: □

Brenda Kincaid 8/10/2015
Name of Notary Public and Commission Expiration Date

Notary Public In and For the State of Florida
CF02 (7/07)

Signature

Notary Public State of Florida
Brenda Kincaid
My Commission EE110947
Expires 08/10/2015
February 3, 2012

Brenda Kincaid  
Corporate Secretary  
Dais Communications, LLC  
4558 SW 35th Street  
Orlando, Florida 32811

Re: Dais Communications, LLC  
CV12-0030

Dear Ms. Kincaid:

Your application and affidavit for a State-Issued Certificate of Franchise Authority for cable and/or video service has been accepted and processed. Enclosed is your Certificate of Franchise Authority.

The Federal Communication Commission’s Cable Act Reform 47 C.F.R. 76.952 states that “all cable operators must provide to the subscribers the name, mailing address and phone number of the franchising authority, unless the franchising authority in writing request that cable operator to omit such information.”

Since we are not authorized to regulate cable activities, the Department of State, Cable and/or Video Franchise Section, requests certificate holders to omit the department’s name and contact information from the monthly billing inserts to subscribers. The Department of State does not have any authority to resolve customer service complaints. The Department of Agriculture and Consumer Services is responsible for responding to customers’ complaints.

If you should have any questions, please call us at (850) 245-6010.

(Rebekah White)

Video and/or Cable Franchise Section  
Enclosures
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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