

Bepartment of State

Certificate of Franchise Authority

I certify that IPV CONNECT, LLC, identification number CV21-0039, issued on 02/03/21, is hereby granted authority to provide cable and/or video service in the following service area(s):

480 Islamorada Boulevard, Punta Gorda FL. 33955.

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 Fourth day of February 2021.



CR2E022 (01-11)

Raunul M. Lee

Secretary of State

E. (State-Issued Cable Franchise) STATE OF FLORIDA COUNTY OF PALM BEACH

AFFIDAVIT

official capacity as (officer, partner, owaer, managing member) MANAGONG MEMBER and do hereby attest to the facts stated herein from uny personal knowledge. I bereby swear and affirm that the following statements are true and correct: 1 The applicant is fully qualified under the provisions of Chapter 610, Florida Statutes, to file this application and affidavit for a certificate of franchise authority. 2 The applicant agrees to comply with all applicable federal Communications Commission all forms required by that agency in advance of offering table or video service 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 supersected by the provisions of Chapter 610, Florida Statutes, or other applicable state law. 4 The applicant agrees to comply with all state laws and rules and municipal and county ordinances and regulations regarding the placement and maintenance of communications fedities in the public rights-of-way that are generally applicable to provides of communications services are consistent with s. 610,104(2)(e) 5a & b, Florida Statutes. 5 The description of the service area consistent with s. 610,104(2)(e) 5a & b, Florida Statutes, for which the applicant vecks a certificate of framchise authority is 480. ISLAMGRADA POLICA/ARD FUNDA GORDA FLORIDA 33955 6 Applicant's principal place of business: \$905.518/VESTMENT LANE SCHEEP AS WEST PALON BEACH. FLORIDA, 3340. Names of the applicant sufficient for purposes of Chapter 48, Florida Statutes: WILLIAM HPINCUS ESO. Tower 1555 1555 Palm Beach lates Blvd Squie 320 West Palm Beach. Florida 33461 7 The applicant will file with the Department of State of any chapter of address or contact person. 1 The applicant will all only the Department of State of any chapter of address or contact person. 1 The applicant will all only the Department of State of any chapter of address or contact person. 1 The applicant of a purpose of the provi		I. DOUGLAS BELL, am employed with IPV CONNECT LLC	
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Print, type or stamp name of notary and commission expiration (SEAL) Michael R Vancini Notary Public New Jersey CF10 (5/17) My Commission Expires 11-13-2022		orn to affirmed and subscribed before me on this 5 day of 2021	
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140. ATAUGU 1		No. 2426951	1

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

	Street address of the principal place of business of the cable and/or video service provice 3965 INVESTMENT LANE		
	SUITE A5		
	WEST PALM BEACH FLORIDA 33404		
	Federal employer identification number or the Department of State's document number 85-1318515		
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: TYLER BELL		
	Title: MANAGING SECRETARY		
	Address: 3965 INVESTMENT LANE		
	Address: 3965 INVESTMENT LANE SUITE A5		
	Address: 3965 INVESTMENT LANE		

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 P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Cable and/or Video Franchising Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CF10 (5/17)



Ron DeSantis Governor Laurel M. Lee Secretary of State

February 3,2021

Douglas Bell IPV Connect LLC Tower 1555 1555 Palm Beach Lakes Blvd Suite 320 West Palm Beach, FL 33401

Re: IPV CONNECT LLC

CV21-0039

Dear Mr. Bell:

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



CV21-039

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