

Certificate of Franchise Authority

I certify that Advanced Cable Communications, LLC., as successor of interest to identification number CV07-0014 issued on 9/14/2007, to Advocate Communications d/b/a Advanced Cable Communications., is hereby granted authority to provide cable and/or video service in the following service area(s) as amended on 04/1/2015:

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 first day of April, 2015.

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n Petzner Ken Petzner Secretary of State

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

| 1) | Name of Certificate holder Advocate Communications, Inc. | | |
|----------|---|--|--|
| 2) | Address of Certificate holder: 12409 N.W. 35th Street Coral Springs, Florida 33065 | | |
| 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)(e)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 | | |
| √ | 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. Advanced Cable Communications, LLC 12409 N.W. 35th Street Coral Springs, Florida 33065 | | |
| | c) Other: (change of address or contact person) | | |
| | d) Notice to Terminate Service. Effective Date: Philip J. Kantor, Counsel March 23, 2015 | | |
| | Printed Name and Title Signature Date | | |
| | | | |

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

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

AFFIDAVIT

| I, | Jim Pagano , am employed with Advanced Cable Communifications, LLC in |
|------|--|
| an | official capacity as (officer, partner, owner, managing member) President |
| hei | beby attest to the facts stated herein from my personal knowledge. I hereby swear and affirm that the following |
| sta | tements are true and correct: |
| I) | |
| | and arridavit for a certificate of franchise authority. |
| 2) | The applicant has filed or will timely file with the Federal Communications Commission all forms required by |
| | usat agency in advance of offering cable 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 superseded by the provisions of Chapter 610. Florida Statutes, or |
| 45 | 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 facilities in the public rights-of-way |
| | that are generally applicable to providers of communications services in accordance with s. 337.401, Florida |
| 5) | Statutes. The description of the complex case consists with a CIO 1846206 2.5 and The Art Court of the Court |
| 5) | The description of the service area consistent with s. 610.104(2)(e) 5a & b, Florida Statutes, for which the applicant seeks a certificate of franchise authority is: |
| | Broward County, City of Corel Springs, City of Weston and City of Parkland |
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| 6) | Applicant's principal place of business: 12409 N.W. 35th Street Coral Springs, Florida 33065 |
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| | Names of the analisant's minning arrays's affile. In Page |
| | Names of the applicant's principal executive officers: Jlm Pagano |
| | |
| | Physical address sufficient for purposes of Chapter 48, Florida Statutes: 12409 N.W. 35th Street Coral Springs, Florida 33065 |
| | Trystodi auditois surriototti tot purposos of Citapter 40, 1 forfida statutos. |
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| 7) | The applicant will file with the Department of State a notice of commencement of service within (5) five. |
| 8) | Business days after first providing service in each area described. |
| 8) | The applicant will notify the Department of State of any change of address or contact person. |
| 9) | The applicant's system shall comply with the Federal Communications Commission's rules and regulations of |
| - | the Emergency Alert System. |
| | 401 |
| | Signature |
| | Jim Pagano/Fresident |
| _ | Printed Name and Title |
| Swo | orn to affirmed and subscribed before me on this 246 day of March , 20 15 |
| Ву | Jim Pagano , personally known or produced identification |
| | (Name of Affiant) type of identification produced |
| | t, type or stamp name of notary and commission expiration |
| | AL) Notary Public - State of Florida |
| CF 1 | 0 (06/13) My Comm. Expires Jun 14, 2016 |
| | Commission # EE 208359 Bonded Through National Notary Assn. |
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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 provided 12409 N.W. 35th Street Coral Springs, Florida 33065 |
|--|
| Federal employer identification number or the Department of State's document number: |
| 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: Jim Pagano |
| Title: PRESIDENT |
| Address; 12409 N.W. 35th Street Coral Springs, Florida 33065 |

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

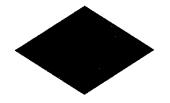
This application and affidavit must be submitted with an application fee of \$10,000.00 and an accompanying fee of \$35.00 and mailed to the State-Issued Certificate of Franchise Authority for Cable and/or Video Service at the following address:

MAILING ADDRESS:

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

OVERNIGHT COURIER:

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



QUINTAIROS, PRIETO, WOOD & BOYER, P.A.

ATTORNEYS AT LAW

WWW.QPWBLAW.COM

one east broward boulevard, suite 1200 fort lauderdale, florida 33301 telephone: (954) 523-7008 \bullet facsimile: (954) 523-7009 March~26,~2015

Via Federal Express Overnight

Ms. Rebekah A. White Division of Corporations Cable and/or Video Franchise Section Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: Transfer of State-Issued Certificate of Franchise Authority to Provide Cable and/or Video Service

Dear Ms. White:

In response to your letter dated March 16, 2015, which I received on March 23, 2015, and in accordance with Section 610.104(7), Florida Statutes, please find the following documents in support of Advocate Communications, Inc., d/b/a Advanced Cable Communications ("Advocate"), transfer of the ownership of the cable system and the State-Issued Certificate of Franchise Authority, *CV07-0014*, for the provision of cable and/or video service to Advanced Cable Communications, LLC:

- 1) Application to Amend a State-Issued Certificate of Franchise Authority for Cable and/or Video Service;
- 2) Signed and notarized affidavit of Mr. Jim Pagano in support of the transfer; and
- 3) Check made payable to the Department of State in the amount of \$35.00 as the filing fee for this transfer.

Ms. Rebekah A. White **Division of Corporations** Cable and/or Video Franchise Section March 26, 2015 Page | 2

Should you need any further information, please do not hesitate to contact me.

Thank you for your cooperation in this matter.

Philip J. Kantor

Counsel to Advanced Cable Communications, LLC

PJK/pc Enclosures

Cc: James J. Pagano



RICK SCOTT

Governor

Ken Detzner
Secretary of State

April 4, 2015

Phillip J. Kantor Counsel Advanced Cable Communications, LLC One East Broward Blvd., Suite 1200 Fort Lauderdale, Florida 33301

Re:

Advanced Cable Communications, LLC

CV07-0014

Dear Mr. Kantor:

We received your Notice of Transfer of Interest regarding CV07-0014. A State-Issued Certificate of Franchise Authority for cable and/or video service issued on 9/14/2007, to Advanced Cable Communications, LLC. Your Notice of Transfer of Interest has been accepted. An amended certificate is attached.

Further, in regards to The Federal Communication Commission's Cable Act Reform 47 C.F.R. ss. 76.952, 76.1602 and 1603. The Department of State, respectfully requests that the certificate holders omit the department's name and contact information on any billing, notice or information provided to subscribers. The department's function is in a ministerial capacity only.

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

Rebekah A. White Video and/or Cable Franchise Section

Encl.



| (Requestor's Name) | |
|--|--------------------------|
| (Address) | 000184830320 |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status Special Instructions to Filing Officer: | 04/01/1501007001 **35.00 |
| | |

Office Use Only