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

Street address of the principal place of business of 8445 SW 80TH STREET	of the cable and/or v	video s	ervice	pr
OCALA, FL 34481			•	
Federal employer identification number or the De 86-1111846	epartment of State's	s docur	ment n	ıun
Name, address, and business telephone number of manager or managing member as a contact person	f an officer, partner for the cable or vid	, owne led ser	er,∰aen vi <b>ce</b> pr	nb roy
whom questions or concerns may be addressed:		Manage Street		Œ.
Name:_KENNETH D. COLEN		als the	22	G
Title: PRESIDENT		W.C.	<u>E</u> ro	12
Address: 8445 SW 80TH STREET, OCALA, FL 34481		TI (/)		- G
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Names of other principal executive officers:C. G	le Service Provider	-		
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Florida street address for, or on behalf of, the Cab purposes of service of process as required in Chap Florida, The Cab Flor	le Service Provider ter 48, F.S.  e to the cable servi- with the Division of	ce prov	cient fo	or
Florida street address for, or on behalf of, the Cabourposes of service of process as required in Chap  Florida, 34481  Service Area: On an attached page, list any changerea that is different from what is currently on file the current service area is correctly listed with the	le Service Provider ter 48, F.S.  e to the cable servi- with the Division of	ce prov	cient fo	or
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Business telephone number: (352) 854-0805  Names of other principal executive officers: C. G.	le Service Provider ter 48, F.S.  e to the cable serviwith the Division of Division, enter "no that the facts stated cument to the Depa	ce provof Corp	vider's	or s s
Florida street address for, or on behalf of, the Cab purposes of service of process as required in Chap Florida, Florida, Florida, Florida, Florida, Service Area: On an attached page, list any chang area that is different from what is currently on file the current service area is correctly listed with the here: NO CHANGE	le Service Provider ter 48, F.S.  e to the cable serviwith the Division of Division, enter "no that the facts stated cument to the Depa	ce provof Corp	vider's	or se se



## RON DESANTIS

Governor

LAUREL M. LEE
Secretary of State

February 22, 2019

Kenneth D. Colen DCM Cable, Inc. 8445 SW 80<sup>th</sup> Street Ocala, Florida 34481

Re:

DCM Cable, Inc. CV07-0024

Dear Mr. Colen:

We have received and filed your application for renewal of your State-Issued Certificate of Franchise Authority for cable and/or video service. A file stamped copy of your renewal application is attached for your records. Please be advised, a renewal application and fee of \$1035.00 is due every five years. The next Renewal Date for DCM Cable, Inc. will be: 2/23/2024.

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

Encl.



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(Ac	ldress)	
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Special Instructions to I	Filing Officer:	
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SECRETARY OF STATE