

State of Florida



Department of State

Certificate of Franchise Authority

I certify that Blue Stream Infrastructure Holdings, LLC, as successor of interest to identification number CV16-0035 issued on 07/10/2017, to TPC PSL Holdings, LLC is hereby granted authority to provide cable and/or video service in the following service area(s) as amended on 07/24/2023:

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-fourth day of July, 2023.



CR2E022 (01-11)


Cord Byrd
Secretary of State

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

- 1) Name of Certificate holder TPC PSL HOLDINGS, LLC
- 2) Address of Certificate holder: 10486 SW Village Center Drive, Post St. Lucie, FL 34987
12409 NW 35 St., Coral Springs, FL 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

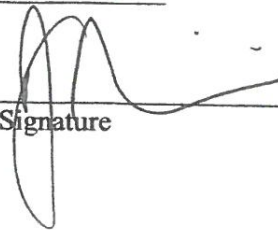
b) Notice of Transfer of Interest. Notification is required within fourteen business days following completion of transfer. Please provide the name and address of any successor in interest.

Blue Stream Infrastructure Holdings, LLC is the successor-in-interest, whose address is 12409 NW 35 Street, Coral Springs, FL 33065 and will provide services within its Service Areas through its affiliates, Blue Stream Holdings, 1, LLC, Blue Stream Holdings 2, LLC, Blue Stream Communications LLC, Home Town Cable TV, LLC and Blue Stream BTS Borrower, LLC.

c) Other: (change of address or contact person)

d) Notice to Terminate Service.
Effective Date: _____

Myron Reising, CFO
Printed Name and Title


Signature

APRIL 28, 2023
Date

2023 JUL 24 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

E. (State-Issued Cable Franchise)

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF Broward

I, Joseph Caravan, am employed with Blue Stream Infrastructure Holdings, LLC in an official capacity as (officer, partner, owner, managing member) CEO 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, Florida Statutes, 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 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 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 Statutes.
- 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:

City of Fort St. Lucie (CV16-0035)

6) Applicant's principal place of business: 12409 NW 35 Street, Coral Springs Florida 33065

Names of the applicant's principal executive officers: Joseph Caravan, Myron Reeling, Orlando Rice and David Smolen

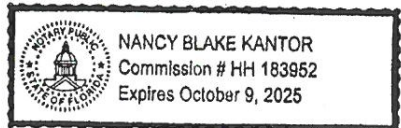
Physical address sufficient for purposes of Chapter 48, Florida Statutes: 2400 E Commercial Blvd; Suite 520, Fort Lauderdale, FL 33308

- 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.
- 9) The applicant will notify the Department of State of any change of address or contact person.
- 10) The applicant's system shall comply with the Federal Communications Commission's rules and regulations of the Emergency Alert System.

[Signature]
Signature
Joseph Caravan, CEO
Printed Name and Title

Sworn to affirmed and subscribed before me on this 20th day of July, 2023.
By Joseph Caravan (Name of Affiant) personally known or produced identification _____
type of identification produced _____

Print, type or stamp name of notary and commission expiration Nancy Blake Kantor 10/9/2025
(SEAL)



2023 JUL 24 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT *of* STATE

RON DESANTIS
Governor

CORD BYRD
Secretary of State

July 24, 2023

Mr. Phillip J. Kantor
Vice President/General Counsel
12409 NW 35th Street
Cape Coral, Florida 33065

Re: Blue Stream Infrastructure Holdings, LLC
CV16-0035

Dear Mr. Kantor:

We received your Notice of Transfer of Interest regarding CV 16-0035. A State-Issued Certificate of Franchise Authority for cable and/or video service issued on 07/10/2017, to TPC PSL Holdings, 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.

Mel Solomon
Video and/or Cable Franchise Section

Encls.



FLORIDA DEPARTMENT *of* STATE

RON DESANTIS
Governor

CORD BYRD
Secretary of State

June 28, 2023

Mr. Philip J. Kantor
Vice President/General Counsel
12409 NW 35th Street
Cape Coral, Florida 33065

Re: TPC PSL Holdings, LLC
CV16-0035

Dear Mr. Kantor:

Your correspondence requesting to amend your state issued Certificate of Franchise Authority for Cable and/or Video Service has been rejected for the following reason(s):

Please resubmit the Application to Amend with a notarized and signed affidavit as required for this type of amendment. Please find enclosed a copy of our affidavit form.

If you have additional questions or need further assistance, please call us at (850) 245-6968.

Sincerely,

Mel Solomon
Cable and/or Video Franchise Section



Blue Stream Communications LLC
12409 NW 35th Street
Coral Springs, FL 33065-2413

April 28, 2023

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

**RE: TPC PSL Holdings, LLC's Application to Transfer
State-Issued Certificate of Franchise Authority**

To Whom it May Concern:

On behalf of TPC PSL Holdings, LLC, enclosed please find the following items:

- Notice of Transfer of Interest of State-Issued Certificate of Franchise Authority (CV16-0035) and
- Check in the amount of \$35.00 made payable to the Florida Department of State.

Thank you for your assistance with this Notice of Transfer. Should You have any questions, please do not hesitate to contact me. Additionally, please find self-addressed stamped envelope to provide Acknowledgement of this transfer.

Sincerely,

/s/ Philip J. Kantor

Philip J. Kantor
Vice President/General Counsel
Blue Stream Communications LLC
pkantor@BlueStreamFiber.com

Enclosures:
Notice and check

CV16-0035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

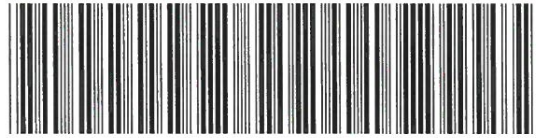
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec'd
7-24-23

Office Use Only



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05/02/23--01025--015 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 JUL 24 PM 4:58

FILED