

Department of State

Certificate of Franchise Authority

I certify that Strategic Technologies, Inc., identification number CV07-0010 issued on 7/11/2007, is hereby granted authority to provide cable and/or video service in the following service area:

Portions of Miami-Dade County (including the Town of Culter Bay and the City of Homestead), as such areas are described in STI's current cable television licenses with Miami-Dade County and the City of Homestead. The service area will be co-extensive with the descriptions contained in such cable television licenses and as reported in STI's annual reports to Miami-Dade County and the City of Homestead.

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.

THE STATE OF THE S

CR2EO22 (01-07)

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capitol, this the Eleventh day of July, 2007

> Kurt S. Browning Secretary of State



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CABLE AND/OR VIDEO
FRANCHISING

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

	ddress of the principal place of business of the cable and/or video service provider
Suite 300	TO ALL AVEILLE
Mlami, FL	. 33172
Federal 65052360	employer identification number or the Department of State's document number:
Name, a	address, and business telephone number of an officer, partner, owner, member, or as a contact person for the cable or video service provider to whom questions or
Name, a manager concerns	address, and business telephone number of an officer, partner, owner, member, or as a contact person for the cable or video service provider to whom questions or s may be addressed: Jorge-Enrique Vargas
Name, a manager concerns Name: Title:	address, and business telephone number of an officer, partner, owner, member, or as a contact person for the cable or video service provider to whom questions or s may be addressed:

 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)

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

STATE OF FLORIDA

) SS:

MIAMI-DADE COUNTY

The undersigned, being duly sworn on oath, deposed and said as follows:

- 1. Strategic Technologies, Inc. ("<u>STI</u>") is fully qualified under the provisions of Chapter 610 of the Florida Statutes (the "<u>Statutes</u>") to file an application and affidavit for a certificate of franchise authority.
- 2. STI has filed or will file with the Federal Communications Commission all forms required by that agency in advance of offering cable or video service in the state of Florida.
- 3. STI 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 of the Statutes or other applicable state law.
- 4. STI 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 Section 337.401 of the Statutes.
- 5. The description of the service area consistent with Section 610.104 (2)(e) and 5a & b of the Statutes, for which STI seeks a certificate of franchise authority is: Portions of Miami-Dade County (including the Town of Culter Bay and the City of Homestead), as such areas are described in STI's current cable television licenses with Miami-Dade County and the City of Homestead. The Service Area will be co-extensive with the descriptions contained in such cable television licenses and as reported in STI's annual reports to Miami-Dade County and the City of Homestead.
- 6. (a) STI's principal place of business is 700 NW 107th Avenue, Suite 300, Miami, FL, 33172.
 - (b) STI's principal executive officers are David J. Kaiserman, Diane J. Bessette and Mark Sustana.
 - (c) STI's physical address sufficient for the purposes of Chapter 48 of the Statutes is CT Corporation System, 1200 South Pine Island Rd., Plantation, FL 33324.
- 7. STI will file with the Florida Department of State (the "<u>Department</u>") a notice of commencement of service within five (5) business days after first providing service in each area described in paragraph 5.
- 8. STI will notify the Department of any change of address or contact person.

9. STI's system shall comply with the Federal Communications Commission's rules and regulations of the Emergency Alert System.

[Signature on following page]

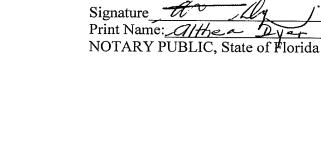
FURTHER, Affiant sayeth not.

JEAN WOODCOCK

The foregoing instrument was acknowledged before me this 5 day of July, 2007, by Jean Woodcock as Vice Preside of Strategic Technologies, Inc., a Florida corporation; such individual is personally known to me. _____or has produced a driver's license as identification _____.

My Commission Expires:

[NOTARIAL SEAL]



(Requestor's Name) (Address) (Address)	300104720143
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