

Bepartment of State

Certificate of Franchise Authority

I certify that CoxCom, Inc., identification number CV07-0012, issued on 8/21/07, is hereby granted authority to provide cable and/or video service in the following service area(s):

Escambia County, Florida; Pensacola, Florida

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-First Day of August, 2007

EVEN DE LES

CR2EO22 (01-07)

Kurt S. Urowning Secretary of State



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FLORIDA DEPARTMENT OF STATE

CABLE AND/OR VIDEO FRANCHISING DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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

	treet address of the principal place of business of the cable and/or video service provider 400 Lake Hearn Drive, Atlanta, Georgia 30319
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	ederal employer identification number or the Department of State's document number: 5-2755479
m	lame, address, and business telephone number of an officer, partner, owner, member, or nanager as a contact person for the cable or video service provider to whom questions or oncerns may be addressed:
N	lame: Joe Brewster
	itle: Vice President, Government Affairs
A	Address: 320 Racetrack Road N.W., Fort Walton, Florida 32547

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)

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

AFFIDAVIT

I, Keith Gregory, am employed with Cox Communications in an official capacity as Vice President and General Manager (officer) 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, F.S., 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 services 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, F.S., or other applicable state law.
- 4) The applicant agrees to comply with all the 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, F.S.
- 5) The description of the service area consistent with s. 610.104 (2)(e) 5a & b, F.S., for which the applicant seeks a certificate of franchise authority is:

Escambia County, Florida Pensacola, Florida

6) Applicant's principal place of business: 1400 Lake Hearn Drive, Atlanta, Georgia 30319

Names of the applicant's principal executive officers: Pat Esser - President; Jim Hatcher - Senior Vice President Legal and Regulatory Affairs

Street Address sufficient for purposes of Chapter 48, F.S.: 320 Racetrack Road, N.W., Fort Walton, Florida 32547

- 7) The applicant will file with the Department of State a notice of commencement of services within five business days after first providing services in each area described.
- 8) The applicant will notify the Department of State of any changes of address or contact person.

Keith Gregory, Vice President and General Manager

9) The applicant's systems shall comply with the Federal Communications Commission's rules and regulations of the Emergency Alert System.

Sworn to affirm and subscribe before me on this 15 day of August 2007, by L. Keith Gregory

Personally known OR Produced Identification

Type of Identification Produced:

Name of Notary Public and Commission Expiration Date

Notary Public In and For the State of Florida

CF02 (7/07)

Printed Name and Title

Signature

(Name of Affiant)

Yvette V. Torres

Notary Public - State of Florida

My Commission Expires April 22, 2011

Notary Public In and For the State of Florida

Escambio County

Signature

						
(Requestor's Name)						
(Address)						
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