

# State of Florida



Department of State

## Certificate of Franchise Authority

I certify that IPV CONNECT, LLC, identification number CV21-0039, issued on 02/03/21, is hereby granted authority to provide cable and/or video service in the following service area(s):

480 Islamorada Boulevard, Punta Gorda FL. 33955.

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 Fourth day of February 2021.



*Laurel M. Lee*

Laurel M. Lee

Secretary of State

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

**AFFIDAVIT**

I, DOUGLAS BELL, am employed with IPV CONNECT LLC in an official capacity as (officer, partner, owner, managing member) MANAGING MEMBER 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applicable federal and state laws and regulations, to the extent such state laws and rules are not in conflict with or superseded by the provisions of Chapter 610, Florida Statutes, or other applicable state law.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:  
480 ISLAMORADA BOULEVARD  
PUNTA GORDA FLORIDA 33955

6) Applicant's principal place of business: 3965 INVESTMENT LANE  
SUITE A5  
WEST PALM BEACH, FLORIDA, 33404

Names of the applicant's principal executive officers: HOWARD BERNSTEIN CFO  
ANTHONY SALAMONI CTO

Physical address sufficient for purposes of Chapter 48, Florida Statutes: WILLIAM H PINCUS ESQ.  
Tower 1555 1555 Palm Beach lakes Blvd Suite 320 West Palm Beach, Florida 33401

- 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.

*Douglas Bell*  
Signature  
DOUGLAS BELL MANAGING MEMBER  
Printed Name and Title

Sworn to affirmed and subscribed before me on this 15 day of Jan, 20 21  
By Michael R Vancini, personally known ✓ or produced identification ✓  
(Name of Affiant) type of identification produced Lic.

Print, type or stamp name of notary and commission expiration  
(SEAL)

**Michael R Vancini**  
**Notary Public**  
**New Jersey**  
My Commission Expires **11-13-2022**  
No. 2426951

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

1. Official name of the cable or video service provider:  
IPV CONNECT LLC  
\_\_\_\_\_  
\_\_\_\_\_
  
2. Street address of the principal place of business of the cable and/or video service provider:  
3965 INVESTMENT LANE  
SUITE A5  
WEST PALM BEACH FLORIDA 33404  
\_\_\_\_\_
  
3. Federal employer identification number or the Department of State's document number:  
85-1318515  
\_\_\_\_\_
  
4. 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: TYLER BELL  
Title: MANAGING SECRETARY  
Address: 3965 INVESTMENT LANE  
SUITE A5  
WEST PALM BEACH, FLORIDA, 33404  
Business telephone number: 856-371-1234  
\_\_\_\_\_
  
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  
P.O. Box 6327  
Tallahassee, FL 32314

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

2021 FEB - 9 AM 10:16



**STATE OF FLORIDA  
DEPARTMENT OF STATE**

**Ron DeSantis**  
*Governor*

**Laurel M. Lee**  
*Secretary of State*

February 3, 2021

Douglas Bell  
IPV Connect LLC  
Tower 1555 1555 Palm Beach Lakes Blvd  
Suite 320  
West Palm Beach, FL 33401

Re: IPV CONNECT LLC  
CV21-0039

Dear Mr. Bell:

Your application and affidavit for a State-Issued Certificate of Franchise Authority for cable and/or video service has been accepted and processed. Enclosed is your Certificate of Franchise Authority.

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  
Enclosures



CV21-0039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

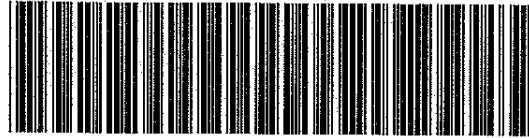
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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