

# State of Florida



Department of State

## Certificate of Franchise Authority

I certify that Home Town Cable TV LLC, identification number CV16-0035, issued on 10/19/2016, is hereby granted authority to provide cable and/or video service in the following service area(s):

City of Port St. Lucie, FL

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 nineteenth day of October, 2016.



CR2EO22 (1-11)

*Ken Detzner*  
Ken Detzner  
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

- A. Official name of the cable or video service provider: Home Town Cable TV, LLC
B. Street address of the principal place of business of the cable and/or video service provider: 10486 SW Village Center Drive, Port St. Lucie, FL 34987
C. Federal employer identification number or the Department of State's document number: 01-0744669
D. 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: Mitchell Rubenstein, Title: Managing Member and President, Address: 10486 SW Village Center Drive, Port St. Lucie, FL 34987, Business telephone number: 561-998-8001
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

**E. (State-Issued Cable Franchise)**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

**AFFIDAVIT**

I, Mitchell Rubenstein, am employed with Home Town Cable TV, LLC, in an official capacity as 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, 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:

City of Port St. Lucie, FL

6) Applicant 's principal place of business: 10486 SW Village Center Drive, Port St. Lucie, FL 34987

Names of the applicant's principal executive officers: Mitchell Rubenstein, Laurie Silvers, and Tammy Hedge

Street Address sufficient for purposes of Chapter 48, F.S.: 10486 SW Village Center Drive, Port St. Lucie, FL 34987, Attention: Mitchell Rubenstein, Managing Member

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

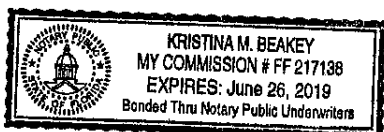
Mitchell Rubenstein, Managing Member and President  
Printed Name and Title

Mitchell Rubenstein  
Signature

Sworn to affirm and subscribe before me on this 18<sup>th</sup> day of October, 2016, by Mitchell Rubenstein  
\_\_\_\_\_ Personally known OR \_\_\_\_\_ Produced Identification  
Type of Identification Produced \_\_\_\_\_

KRISTINA M. BEAKEY 6/26/2019  
Name of Notary Public and Commission Expiration Date

Kristina M. Beakey  
Signature





**STATE OF FLORIDA  
DEPARTMENT OF STATE**

**RICK SCOTT**  
*Governor*

**Ken Detzner**  
*Secretary of State*

October 19, 2016

Mitchell Rubenstein  
President  
Home Town Cable TV, LLC  
10486 SW Village Center Drive  
Port St. Lucie, FL 34987

Re: Home Town Cable TV, LLC  
CV16-0035

Dear Mr. Rubenstein:

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





# HOME TOWN COMMUNICATIONS

connecting you with the world

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10486 SW Village Center Drive • Port St. Lucie, FL 34987 • Phone: 561-998-8001

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Via FedEx

October 18, 2016

Florida Department of State  
Division of Corporations  
Cable and/or Video Franchising Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: State Franchise

To Whom It May Concern:

Enclosed are the following documents for Home Town Cable TV, LLC:

1. Application for a State-Issued Certificate of Franchise Authority to Provide Cable and/or Video Service.
2. State of Florida Affidavit.
3. Check for \$10,035 (\$10,000 application fee and \$35 accompanying fee).

If you require anything further, please let me know.

Sincerely,

Home Town Cable TV, LLC

Mitchell Rubenstein  
President

Enclosures

CV116-0035

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

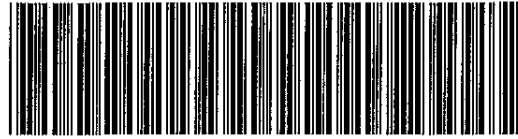
Special Instructions to Filing Officer:

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