

Company ID: 00128575
Millennium Telecom, L.L.C.
7904 River Fork Drive
Nashville, TN 37221

BEFORE THE TENNESSEE REGULATORY AUTHORITY
Nashville, TN June 20, 2000

IN RE: CASE NUMBER: 00-00365

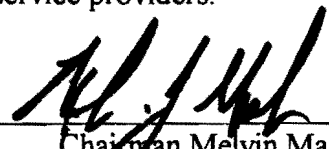
Application for Authority to Provide Operator Services and/or Resell Telecommunications Services in Tennessee Pursuant to Rule 1220-4-2-.57.

---ORDER---

This matter is before the Tennessee Regulatory Authority upon the application of the above-mentioned company for certification as a reseller or telecommunication operator service provider in Tennessee. The TRA considered this application at a Conference held on June 20, 2000 and concluded that the applicant has met all the requirements for certification and should be authorized to provide operator services and/or resell telecommunications services on an intrastate basis.

IT IS THEREFORE ORDERED:

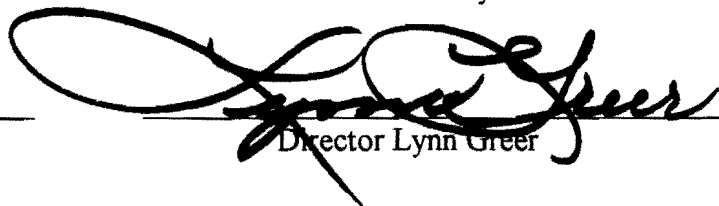
1. That the above-mentioned company is issued a Certificate of Convenience and Necessity as an operator service provider and/or reseller of telecommunications services for state-wide service in Tennessee as specified in its application on file with the Authority.
2. That said company shall comply with all applicable state laws and TRA rules and regulations.
3. That this order shall be retained as proof of certification with this Authority, and may be used to obtain appropriately tariffed service and billing arrangements from Authority authorized telecommunications service providers.


Chairman Melvin Malone


Director Sara Kyle

ATTEST:


Executive Secretary


Director Lynn Greer

HAND-DELIVERED

May 1, 2000

Daniel Mack
President
Millennium Telecom LLC
7904 River Fork Drive
Nashville, TN 37221

PAID T.R.A.	
Chk #	<u>1057</u>
Amount	<u>50.00</u>
Rcvd By	<u>JR</u>
Date	<u>5-3-00</u>

RECEIVED
TELECOMMUNICATIONS DIVISION
TENNESSEE REGULATORY AUTHORITY

MAY 09 2000

Sharla Dillon
Administrative Services Assistant
Telecommunications Division
Tennessee Regulatory Authority
460 James Robertson Parkway
Nashville, TN 37243-0505

Dear Sharla,

The accompanying tariff material, issued by Millennium Telecom L.L.C. is sent to you for approval for on our application for Certificate to provide Operator Services and/or Resell Telecommunication Services in Tennessee.

Enclosed are three copies of the above mentioned application and a \$ 50.00 check for the application fee.

Please address any inquiries or further correspondence regarding this filing to my attention at P.O. Box 210978, Nashville TN 37221. My contact numbers are:
615-662-9041 Office, 615-662-1686 Fax.

Sincerely,

Millennium Telecom, L.L.C.

By: Dan Mack

Dan Mack, President

VOUCHER NO. 177161873
CHK 1057 SRC. 281.03
AMT. REC. 50.00
DEPOSIT DATE 5/08/00

**APPLICATION FOR CERTIFICATE
TO PROVIDE OPERATOR SERVICES AND/OR
RESELL
TELECOMMUNICATION SERVICES IN TENNESSEE
SECTION A**

Application is hereby made for a certificate of authority pursuant to Rule 1220-4-2-.57 to provide telecommunications services in the State of Tennessee.

Part I: General Information

A. Name of Applicant Millennium Telecom, L.L.C.

Tenn. Secretary of State Certificate of Authority ID 0372316

Federal Taxpayer ID Number 62-1790882

Social Security Number for Applicants
Applying as Individuals Not Applicable.

Any trade name(s), assumed name(s) or
fictitious name(s) used by applicant Not Applicable.

If applicant has affiliate(s) engaged in providing telecommunications services, provide the above requested information for the affiliate(s), as well as for the applicant.

Not Applicable.

*****IMPORTANT INFORMATION*****

If applicant has affiliate(s) or parent company, or constituency corporations, engaged in providing telecommunications services, or operating under any trade name, assumed name or fictitious name used by the above, provide the above requested information on all parts of this application as well as for the applicant. Provide this information on a separate attachment, if necessary.

THIS SECTION FOR TRA USE ONLY	
Docket Number: _____	Company ID Number <u>00-00365</u> Date Approved <u>128575</u> Evaluator _____

- B. Describe other businesses or business transactions, if any, at the same location as the principal business address: **There are no other business(es) in operation at the principal business address of Millennium Telecom, L.L.C.**
- C. Provide the name, business and home address of and a chronological summary of employment history and business experience over the preceding eight years of:
- (a) The proprietor, if the applicant is an individual;
 - (b) Every member, if the applicant is a partnership;
 - (c) Each Executive Officer, Director and each Key Stockholder if the applicant is a joint stock association or a corporation. (Note: If applicant is a publicly traded corporation or a subsidiary of such a corporation, it does not need to provide this information)
 - (d) Any person in a position to exercise control or direction of, the business of the applicant, regardless of the form of organization of the applicant.

Information to be included:

NAME	TITLE	DATE OF BIRTH	SOCIAL SECURITY NUMBER
BUSINESS ADDRESS		PHONE NUMBER	
HOME ADDRESS		PHONE NUMBER	
EMPLOYMENT HISTORY			

Provide the above requested information on separate attachments. (SEE ATTACHMENTS)

- D. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been associated with a business whose authority to transact business was denied, revoked or suspended by a state or federal regulatory or law enforcement entity?
 _____ Yes ☒ No If yes, please explain fully.
- E. Has the Tennessee Regulatory Authority, or any other agency of the State of Tennessee, any federal agency or any agency of any state ever initiated a regulatory action or order against the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust)?
 _____ Yes ☒ No If yes, please explain fully.
- (1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust), been enjoined or restrained by order by any court or state or federal regulatory or law enforcement entity from engaging in any conduct or practice related to the telecommunications business?
 _____ Yes ☒ No If yes, please explain fully.
- F. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been associated with a business who has ceased providing telecommunications services in any state, describe the circumstances. (Use additional pages if necessary)
 _____ Yes ☒ No If yes, please explain fully.

- G. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been convicted of any crime or crimes, or charged in court with any fraudulent or dishonest acts in any transaction of any kind, or confined in any penal institution? If so list such persons, give details, state results and final outcome. (Use additional pages if necessary)
_____ Yes _____X_____ No If yes, please explain fully.

- (1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been indicted, convicted, pled guilty or pled nolo contendere to a felony in Tennessee or elsewhere?
_____ Yes _____X_____ No If yes, please explain fully.

- H. Name and telephone number of contact person authorized to respond to Authority inquiries regarding company operations Monday through Friday.

<u>Dan Mack</u>	<u>(615) 662-9041</u>	<u>(615) 662-1686</u>
Name	Phone Number	Fax Number
<u>877-797-5666</u>		<u>danmack@millenniumld.com</u>
Toll Free Number		e-mail Address

- (1) Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.

<u>Dan Mack</u>	<u>(615) 662-9041</u>	<u>(615) 662-1686</u>
Name	Phone Number	Fax Number
<u>877-797-5666</u>		<u>danmack@millenniumld.com</u>
Toll Free Number		e-mail Address

- I. List a toll-free telephone number and mailing address that consumers can call or write to report service problems and/or request refunds or adjustments.

<u>877-797-5562</u>	<u>877-797-5574</u>	<u>P.O. Box 210978</u>	<u>Nashville, TN 37221</u>
Phone Number	Alternate Number	Mailing Address	

- J. Provide the name and address of the registered agent for service of process:

Daniel M. Mack
7904 River Fork Drive
Nashville, TN 37221

- K. Identify all authorized agents in the state, if any by name, address, business and home phone numbers and any other businesses conducted by the agent at the same location:
(use additional sheets if necessary)

Millennium Telecom, L.L.C. does not utilize authorized agents at the present time.

Part II:

- A. Check the type of telecommunications services you plan to provide in Tennessee.

___X___ Resell Interexchange long distance services
_____ Operator Services
_____ Resell Local Services
_____ Other (describe) _____

*See letter
Atd. 5/30/00*

- B. If providing operator services, list company name, address and contact person for all reseller carriers you serve in Tennessee. Provide the information on Appendix 1.

Not Applicable.

- C. List the state(s) where the applicant, its parent company and all affiliates is authorized to operate at this time. For each state, describe the applicant's current activities along with a history of operations there. (Use additional pages if necessary)

Millennium Telecom, L.L.C. is start up venture in the state of Tennessee and has not requested to operate in other states.

For the above states, list the number and types of complaints filed against applicant, and the complaint(s)' current status. Provide this information on a separate attachment if necessary.

There are no complaints filed against Millennium Telecom, L.L.C.

If applicant has affiliate(s) or parent company, or constituency corporations, engaged in providing telecommunications services, or operate under any trade name, assumed name or fictitious name used by the above, provide the above requested information for all as well as for the applicant. Provide this information on a separate attachment, if necessary.

Not Applicable.

- D. List any states that the applicant or any affiliate, parent company, or constituency corporation operating under any trade name, assumed name or fictitious name has been denied authority to provide service. (use additional page if necessary)

Millennium Telecom, L.L.C. has not been denied authority to provide telecommunications services by any entity.

- E. Areas in Tennessee to be served.

All Areas in Tennessee.

- F. What type of customers will the applicant serve?

- a. Business ☒ X
b. Residential ☒ X
c. Aggregators _____
(e.g. Hotels, Payphones)
d. Other (specify) _____

- G. Does the applicant allow a property-imposed fee (PIF) to be added to the price of intrastate telephone calls over its network? If yes, specify amount. **No.**

- H. Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers' price for similar services? Yes ☒ X No _____

- I. Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II¹. **See Appendix II.**

- J. What is applicant's 10XXX or 800 access code, if applicable?

Millennium Telecom, L.L.C.'s 800 access code is 800-866-3691.

- K. Does the applicant now have or plan to have any telecommunication's facilities (e.g. switches, fiber lines) in Tennessee? **No.**

¹Applicant is required to fill out an Informational Tariff Form. Failure to fill out this form will cause the applicant's request to be rejected

- L. What facility-based network(s) will the applicant be reselling?
Qwest Communications Corporation.
- M. Will the applicant be utilizing the local telephone company's billing system or bill customers directly²?
Millennium Telecom, L.L.C. will be billing customers directly. A sample of our bill is attached.
- N. Describe briefly how the applicant plans to market their services in Tennessee.
Millennium Telecom, L.L.C. will market long distance services primarily to small and middle market businesses statewide using direct sales techniques.
- O. If independent telemarketers are to be used, list the name, contact person, address, phone number and federal taxpayer ID for each company.
Millennium Telecom, L.L.C. has no independent telemarketing programs at this time and none are planned for the future.
- P. Describe the methods and procedures by which the applicant will use to switch a consumer's preferred interexchange service, if applicable. Use additional pages if necessary. If you have a written procedure or company guidelines, attach copies
Millennium Telecom, L.L.C. will obtain a signed letter of authority and a signed service order agreement prior to switching a consumer's preferred interexchange service.
- Q. Applicant has the ability and agrees to honor the form of call blocking that the consumer has subscribed to with their local telephone company. Yes X No
- R. Applicant gives permission to the local telephone company to provide the Authority a periodic sample of the reseller's intrastate toll calls. The purpose of this analysis is to audit the reseller's rates to assure they are at or below the dominant carrier's tariffed rates.
Yes X No

²A copy of a bill is required if the applicant is going to bill the customer directly.

(e) Provide the history of material litigation and criminal convictions of every current director, executive officer, or key shareholder of the applicant for the ten-year period prior to the date of this application. **Millennium Telecom, L.L.C. has no history of material litigation and criminal convictions to report.**

(f) If applicable, attach a copy of the instrument creating the trust and all amendments thereto: **Not Applicable.**

B. _____ Proprietorship

_____ Partnership

_____ General

Attach a copy of the partnership agreement along with any amendments.

_____ Limited

Attach a copy of the certificate of limited partnership and the partnership agreement along with any amendments.

_____ Other (Explain on separate sheet)

All of the above will be required to submit a valid business license.

(a) Identify the place and date of the applicant's qualification to provide telecommunications services in this state.

Place: Nashville, Tennessee

Date: June 11, 1999

(b) List the full name, social security number and address of owners, if a sole proprietorship, or all partners identifying the percentage of ownership:

ATTACH ADDITIONAL PAGES AS NECESSARY

Not Applicable.

C. Number of employees: **None at present.**

Employer Identification Number (E.I.N.) **62-1790882**

Part IV: Financial Information

A. Address where business records are kept: **7904 River Fork Drive**
Nashville, TN 37221
615-662-9041

B. Attach a copy of the applicant's unconsolidated and consolidated audited financial statements for the current year and if available, for the immediately preceding three-year period. Provide in detail the applicant's financial condition, including balance sheet and income statement, or a copy of IRS form 1120 or 1065 filed by your business for the previous year. Attach, if available, a copy of your company's 10K and/or stockholder reports.

Millennium Telecom, L.L.C. is a start up company and has no prior or current corporate financial statements to provide. 1998 Tax Returns of the principals are provided.

(1) Fiscal year end: **Month: December Day: 31st**

(2) Date of most recent audited, unconsolidated financial statements of Applicant:
Millennium Telecom, L.L.C. is a start up company and has no prior or current corporate financial statements to provide. 1998 Tax Returns of the principals are provided.

(3) If applicable, name and address of independent certified public accountant:

Edwin Peel, Jr.

33 Music Square West, # 104A

Nashville, TN 37203

- (4) Period covered by financial statement attached:
Millennium Telecom, L.L.C. is a start up company and has no prior or current corporate financial statements to provide. 1998 Tax Returns of the principals are provided.

C. Does the applicant currently have an internal auditor and/or internal audit program? **No.**

If so, name of internal auditor: **Not Applicable.**

- D. If applicable, provide a history of applicant's material litigation and criminal convictions for the ten-year period prior to the date this application is made. Material litigation is defined as any litigation that, according to generally accepted accounting principals, is deemed significant to person's financial health and would be required to be referenced in annual audited financial reports to shareholders or similar documents. **Millennium Telecom, L.L.C. has no history material litigation and criminal convictions to report.**

Part VI: Rule Compliance Agreement

- A. Have you received, read, and understand the Tennessee Regulatory Authority's (TRA) Reseller Rules and Regulations, (Appendix III) in its entirety?
__X__ Yes No
- B. Do you understand the penalties for non-compliance, and all associated fees to provide such service? **__X__** Yes No

Mail the completed application and a check for \$50.00 to: Tennessee Regulatory Authority
P.O. Box 198907
Nashville, TN 37219-8907

Should you have any questions, call: 615-741-7489, ext. 163

The Reseller or Operator Service Provider applicant, hereby, affirms the following:

Will comply with the TRA Reseller Rules and all applicable Authority Rules and state laws, including T.C.A. Section 65-5-206 (Appendix IV)

Having been duly sworn, and under penalty of perjury, I hereby certify that the representatives in this RESELLER APPLICATION and all attachments and appendices are true and correct to the best of my knowledge and belief. I further understand that omissions or inaccuracies may result in denial of the APPLICATION and grounds for revocation of Certificate of Authority.

Individuals and Partners:

Signature

Printed Name

Signature

Printed Name

**For Corporations and
Other Organizations:**

Signature

Printed Name

Signature

Printed Name

Millennium Telecom, L.L.C.
Name of Corporation

BY:

X Daniel M. Mack

Daniel M. Mack
Printed Name

President
Title

ATTEST:

X Debbie Flottman

Debbie Flottman
Printed Name

Teller
Title

On this the 2nd day of May, 2000 before me, a Notary Public

known to me to be the person(s) named in, and who executed the foregoing application, being duly sworn according to law, deposes and says that the statements and representations set forth in the above application are true and correct to the best of his/her knowledge and belief.

Jessica Kendall Shaw
Notary Public

Seal

My Commission Expires July 22, 2000

Secretary of State

Corporations Section

James K. Polk Building, Suite 1800

Nashville, Tennessee 37243-0306

DATE: 06/14/99
REQUEST NUMBER: 3695-2930
TELEPHONE CONTACT: (615) 741-2286
FILE DATE/TIME: 06/11/99 0905
EFFECTIVE DATE/TIME: 06/11/99 0905
CONTROL NUMBER: 0372316

TO:
JAMES C. DALE III, ATTORNEY
P.O. BOX 198258

NASHVILLE, TN 37219

RE:
MILLENNIUM TELECOM, LLC
ARTICLES OF ORGANIZATION -
LIMITED LIABILITY COMPANY

CONGRATULATIONS UPON THE FORMATION OF THE LIMITED LIABILITY COMPANY IN THE STATE OF TENNESSEE WHICH IS EFFECTIVE AS INDICATED ABOVE.

A LIMITED LIABILITY COMPANY ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DAY OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE LIMITED LIABILITY COMPANY'S FISCAL YEAR. ONCE THE FISCAL YEAR HAS BEEN ESTABLISHED, PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE LIMITED LIABILITY COMPANY AT THE ADDRESS OF ITS PRINCIPAL OFFICE OR TO A MAILING ADDRESS PROVIDED TO THIS OFFICE IN WRITING. FAILURE TO FILE THIS REPORT OR TO MAINTAIN A REGISTERED AGENT AND OFFICE WILL SUBJECT THE LIMITED LIABILITY COMPANY TO ADMINISTRATIVE DISSOLUTION.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE LIMITED LIABILITY COMPANY CONTROL NUMBER GIVEN ABOVE. PLEASE BE ADVISED THAT THIS DOCUMENT MUST ALSO BE FILED IN THE OFFICE OF THE REGISTER OF DEEDS IN THE COUNTY WHEREIN A LIMITED LIABILITY COMPANY HAS ITS PRINCIPAL OFFICE IF SUCH PRINCIPAL OFFICE IS IN TENNESSEE.

FOR: ARTICLES OF ORGANIZATION -
LIMITED LIABILITY COMPANY

ON DATE: 06/11/99

FROM:
JAMES C. DALE III (BOX 198258/NASHVILLE)
PO BOX 198258

NASHVILLE, TN 37219-0000

RECEIVED: FEES \$300.00 \$0.00
TOTAL PAYMENT RECEIVED: \$300.00

RECEIPT NUMBER: 00002508561
ACCOUNT NUMBER: 00172289

Riley C. Darnell

RILEY C. DARNELL
SECRETARY OF STATE

