

September 13, 2017 Via Overnight Delivery (Plus E-Filed Copy)

Ms. Darlene K. Standley, Asst. Chief - Telecommunications Tennessee Public Utilities Commission 502 Deaderick Street, 4th Floor Nashville, TN 37243

Docket No. 17-00106

RE:

ACN Communication Services, Inc. Notification of Name Change

Dear Ms. Standley:

Enclosed please find the original and four copies of this letter and exhibit submitted on behalf of ACN Communication Services, Inc. ("ACN" or "Company") as notification to the Tennessee Public Utilities Commission of a change in Company name to ACN Communication Services, LLC. The Company respectfully requests that the Commission issue an updated certificate, if applicable, to reflect the Company's name as "ACN Communication Services, LLC." The Company is authorized to provide resold and facilities-based local exchange and resold interexchange services in Tennessee pursuant to authority granted in Dockets No. 03-00392 and 00-00043.

On July 24, 2015, ACN Communication Services, Inc., a Michigan corporation, underwent a statutory conversion to become ACN Communication Services, LLC, a Michigan limited liability company. The conversion of the Company to a limited liability company was merely a change in its corporate form accomplished through the filing of a Certificate of Conversion in Michigan and did not entail any merger or other transactions interrupting the existence of the Company. Enclosed is evidence of the Company's name change filing with the Tennessee Secretary of State, Exhibit A. A copy of the General Surety Rider amending the Company's Bond No. 3349232 to reflect the change in Company name is enclosed as Exhibit B. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

The change in corporate form will have no customer impact, as the name reflected in all customer communications (bills, notices, customer service, etc.) will remain "ACN Communication Services." Therefore, customer notice was not required. However, a bill message notice was provided to customers stating: "ACN Communication Services, Inc.' has converted to a limited liability company and its name is now 'ACN Communication Services, LLC'. This change will be processed by the appropriate authority(ies) in your state, but it will not affect your service or rates, including any of your rights or obligations."

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose. Any questions you may have regarding this filing should be directed to my attention at 407-704-3031 or via email to Sthomas@tminc.com. Thank you for your assistance in this matter.

Sincerely,

Sharon Thomas

Consultant to ACN Communication Services, Inc.

file:

ACN Communication Services - Tennessee

tms:

TNx1704

Enclosures ST/bc

Technologies Management, Inc. P.O. Drawer 200 Winter Park, FL 32790 407-740-8575

Regions Bank 63-466/631

62816

8/17/2017

PAYTO THE ORDER OF

Tennessee Regulatory Authority

\*\*25.00

Tennessee Regulatory Authority 460 James Robertson Pkwy. Nashville TN 37243

**DOLLARS** 

**MEMO** 

ACN Communication Services/Name Change Applic

"O62816" "O63104668" O184122250"

Technologies Management, Inc.

62816

Tennessee Regulatory Authority

8/17/2017

AUTHORIZED SIGNATURE

514.000 · Reimburseable Client Expense ACN Communication Services/Name Change Applic

25.00

Cash Operating Regio ACN Communication Services/Name Change A

25.00

ACN Communication Services, LLC

Exhibit A

Secretary of State



### **Division of Business Services Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

ACN Communication Services, LLC 1000 PROGRESS PL CONCORD, NC 28025-2449

May 31, 2017

### Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

SOS Control #:

000906505

Formation Locale: MICHIGAN

Filing Type:

Limited Liability Company - Foreign

Date Formed:

07/24/2015

Filing Date:

05/31/2017 2:46 PM

Fiscal Year Close: 12

Status:

Active

Annual Report Due: 04/01/2018

**Duration Term:** 

Perpetual

Image #:

B0389-9544

Managed By:

Member Managed

**Document Receipt** 

Receipt #: 003401413

Filing Fee:

\$300.00

Payment-Check/MO - TECHNOLOGIES MANAGEMENT, INC., WINTER PARK, FL

\$300.00

**Registered Agent Address:** 

C T CORPORATION SYSTEM

800 S GAY ST

KNOXVILLE, TN 37929-9729

**Principal Address:** 

1000 PROGRESS PL

CONCORD, NC 28025-2449

Congratulations on the successful filing of your Application for Certificate of Authority for ACN Communication Services, LLC in the State of Tennessee which is effective on the date shown above. Please visit the Tennessee Department of Revenue website (apps.tn.gov/bizreg) to determine your online tax registration requirements. If you need to obtain a Certificate of Existence for this entity, you can request, pay for, and receive it from our website.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Secretary of State

Processed By: Carol Dickerson

# APPLICATION FOR CERTIFICATE OF AUTHORITY LIMITED LIABILITY COMPANY (ss-4233)

Page 1 of 2



**Business Services Division** Tre Hargett, Secretary of State State of Tennessee 312 Rosa L. Parks AVE, 6th Fl. Nashville, TN 37243-1102 (615) 741-2286

For Office Use Only

1796	Filing Fee: (minimum fee = \$30	\$50.00 per meml 00, maximum fee			
To The Secretary of the State of Tennessee: Pursuant to the provisions of T.C.A. §48-249-904 of the Tennessee Revised Limited Liability Company Act, the undersigned hereby applies for a certificate of authority to transact business in the State of Tennessee, and for that purpose sets forth:					
1. The name of the Limited Liability	Company is: <u>ACN CO</u>	mmunicatio	on Services,	LLC	
If different, the name under which	h the certificate of authorit	y is to be obtaine	d is:		
if its name does not comply with th	<b>NOTE:</b> The Secretary of State of the State of Tennessee may not issue a certificate of authority to a foreign Limited Liability Company if its name does not comply with the requirements of T.C.A. §48-249-106 of the Tennessee Revised Limited Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an application must be filed pursuant to T.C.A. §48-249-106(d).				
2. The state or country under whos	se law it is formed is: Mic	higan			
and the date of its formation is:			nced doing business in	Tennessee is:///////	
NOTE: Additional filing fees and commenced doing business in §48-249-905(c)	d proof of tax clearance co Tennessee prior to the app	nfirming good sta roval of this appl	nding may apply if the cation. See T.C.A. §4	e Limited Liability Company 8-249-913(d) and T.C.A.	
3. This company has the additiona	designation of:				
4. The name and complete addres  Name: CT Corporation  Address: 800 South Ga  City: Knoxville	on System	d office located in		ee is:County: <u>Knox</u>	
5. Fiscal Year Close Month: Dec	ember				
6. If the document is not to be effective Date:    Month   Day	ctive upon filing by the Sec		e delayed effective da	ate and time is: (Not to exceed 90 days)	
7. The LLC will be: X Member	Managed Manager M	anaged Dire	ctor Managed Boo	ard Managed Other	
8. Number of Members at the date of filing: One					
9. Period of Duration: 🛛 Perpetua	ol Other Month	l Day Year			
10. The complete address of its prin	cipal executive office is:				
Address: 1000 Progres					
city: <u>Concord</u>	State	: NC		Zip Code: <u>28025-2449</u>	

RDA 2458

# **APPLICATION FOR CERTIFICATE OF AUTHORITY** LIMITED LIABILITY COMPANY (95-4233)

Page 2 of 2

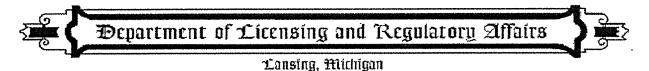


**Business Services Division** Tre Hargett, Secretary of State State of Tennessee 312 Rosa L. Parks AVE, 6th Fl. Nashville, TN 37243-1102 (615) 741-2286

Filing Fee: \$50.00 per member (minimum fee = \$300, maximum fee = \$3,000) For Office Use Only

•			
The name of the Limited Liability Company is: ACN Communication Services, LLC			
11. The complete mailing address of the entity (If different from Address:Same			
City: State:	Zip Code:		
12. Non-Profit LLC (required only if the Additional Designation I certify that this entity is a Non-Profit LLC whose sole under or subject to the provisions of the Tennessee No			
13. Professional LLC (required only if the Additional Designation of "Professional LLC" is entered in section 3.)  I certify that this PLLC has one or more qualified persons as members and no disqualified persons as members or holders.  I certify that this entity meets the requirement of T.C.A. §48-249-1123(b)(3)  Licensed Profession:			
14. Series LLC (required only if the Additional Designation of "Series LLC" is entered in section 3.)  ☐ I certify that this entity meets the requirements of T.C.A. §48-249-309(i)			
If the provisions of T.C.A. §48-249-309(i) (relating to foreign series LLCs) apply, then the information required by that section should be attached as part of this document.			
15. Obligated Member Entity (list of obligated members and signatures must be attached)  This entity will be registered as an Obligated Member Entity (OME) Effective Date:  Month Day Year			
☐ I understand that by statute: THE EXECUTION AND FILING OF THIS DOCUMENT WILL CAUSE THE MEMBER(S) TO BE PERSONALLY LIABLE FOR THE DEBTS, OBLIGATIONS AND LIABILITIES FOR THE LIMITED LIABILITY COMPANY TO THE SAME EXTENT AS A GENERAL PARTNER OF A GENERAL PARTNERSHIP. CONSULT AN ATTORNEY.			
16. Other Provisions:			
Signature Date  TECHNOLOGIES MANAGEMENT INC. AS ATTORNEY-IN-FACT BY SHARON THOMAS, CONSULTANT  Signer's Capacity (if other than individual capacity)	Sharon Thomas Name (printed or typed)		





This is to Certify That

#### ACN COMMUNICATION SERVICES, LLC

was validly organized on July 24, 2015 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1451457

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 18th day of May, 2017

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

# Michigan Department of Licensing and Regulatory Affairs

### Filing Endorsement

This is to Certify that the

CERTIFICATE OF CONVERSION AND ARTICLES OF ORGANIZATION

for ACN COMMUNICATION SERVICES, INC. ID Number: 10521A

TO ACN COMMUNICATION SERVICES, LLC ID Number: E6797H

received by facsimile transmission on July 24, 2015, is hereby endorsed filed on

July 24, 2015, by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 24<sup>th</sup> day of July, 2015.

, Director

Corporations, Securities & Commercial Licensing Bureau

CORPO	AN DEPARTMENT OF LICE RATIONS, SECURITIES & C	OMMERCIAL LI	CENSING BUREAU	
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Nerres A(N Lega Address	1 beparament			
1000 Progress Place Dity Concord	State North Caroline	ZIP Code 28028	EPFECTIVE DATE:	

# CERTIFICATE OF CONVERSION For use by a Corporation Converting into a Business Organization

Pursuant to the provisions of Act 284, Public Acts of 1972 (profit corporations), Act 23, Public Acts of 1993 (limited liability companies), and Act 162, Public Acts of 1982 (nonprofit corporations), the undersigned corporation executes the following Certificate of Conversion.

1. Before Conversion

Entity Name:			Entity ID:
ACN Communication Services, Inc.		e, inc.	10521A
Domastic Profit Corporation		Domestic Profit Corporation	
Indicate (X)		Domestic Nonprofit Corporation	
Entity Type		Street Address, if different then the one provided in item 3:	
		Foreign Profit Corporation	
		Foreign Nonprofit Corporation	
2. After Conve	ersion		
Entity Name: ACN Communica	tion Services	ILC	
		Domestic Profit Corporation	
Indicate (X)		Domastic Nonprofit Corporation	
Entity Type		Foreign Profit Corporation	
		Foreign Nonprofit Corporation	
Domestic Limited Liability Company			
		Foreign Limited Liability Company	
f the converting nemberships, at	corporation nd has not a	is a domastic corporation that has not commenced business, has r locted a board of directors, proceed to item 9.	not be used any shares or
the converting	corporation i	s a domestic corporation that has commenced business or a foreign	ocorporation, proceed to item 3.

A. A. J. L. W. J. L. W. Cherninalian
3. Surviving Business Organization Governing Statute:
Michigan Limited Liability Company Act (Act 23 of 1993)
Street Address:
1000 Progress Place, Concord, NC 20025
Principal Place of Business:
1000 Progress Place, Concerd, NC 28025
1000 ( 1000 ) 1000
4. Complete only if converting a profit corporation.
Designation and number of outstanding shares in each class and sades 1,000 SNAVCS COMM ON STOCK
Indicate class and series of shares entitled to vote 1 vote for each that of common stock
Indicate class and series entitled to vote as a class, if any N/A
If the number of shares is subject to change prior to the effective date of the conversion, the manner in which the change may occur is as follows:
N/14
5. Complete only if converting a nonprofit corporation and it is organized on a stock basis.
Designation and number of outstanding shares in each class
Indicate class of shares entitled to yole
Indicate class of shares entitled to vote as a class, if any
If the number of shares is subject to change prior to the effective date of the conversion, the manner in which the change may
occur is as follows:
•
3. Complete only if converting a nonprofit corporation and it is organized on a membership basis.
or a corporation organized on a membership basis, state (a) a description of its members and (b) the number, classification.
and voling rights of its members:
•
,
Complete only if converting a nonprofit corporation and it is organized on directorship basis.
or a corporation organized on a directorable basis, state (a) a description of the organization of its board and (b) the umber, classification, and voting rights of its directors:
hiteral commindation and total suffice of the engages.
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The manner and basis of converting the shares or memberships of the converting comporation into ownership interests or obligations of the surviving business organization, into cash, into other consideration that may include ownership interests or obligations of an entity that is not a party to the conversion, or into a combination of cash and other consideration.	
	_

On the effective date of the conversion, each of the shares of stock of the converting corporation outstanding immediately before the effective date, regardless of class, will be converted into membership interests of the surviving limited liability company. As a result, the sole shareholder of the converting corporation will be the sole member of the surviving limited liability company immediately following the conversion. This conversion constitutes a plan of liquidation for U.S. federal income tex purposes.

9.	(Complete only if a later effective date is desired other than the date of filling.	The date must be no more than
-	90 days effer the receipt of this document by the administrator.)	

•	
The conversion is effective on thetay of	

The plen of conversion will be furnished by the surviving business organization, on request and without cost, to any shareholder or member of the converting corporation.

The conversion is permitted by the law that will govern the internal stifets of the business organization after conversion and the surviving business organization compiles with that law in converting.

10. The assumed names being transferred to continue for the remaining effective period of the Certificate of Assumed Name on file prior to the conversion are:

Assumed Name	Expiration Date '
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	•

11. The converting corporation's name and/or assumed name(s) to be used as new assumed name(s) of the surviving business organization:

	Assumed Name		
		•	
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12. Signatures: Complete only Section (a) or (b) if the converting corporation is domestic.

Complete only (c) if the converting corporation is foreign.

Complete if the domestic corporation has not commenced business:		
The plan of conversion was approved by unanimous conset the corporation has not yet commenced business, has not last directors in accordance with Section 745(1)(d) of the Act.	ont of the incorporators of the converting domestic corporation and sed any shares or memberships, and has not elected a board of	
Signed this day of	- Company Comp	
Gignos tilas		
(Signature of Incorporator)	(Signature of Incorporator)	
(Type or Print Name)	(Type or Print Name)	
·		
(Statebase of Incorporator)	(Signature of incorporator)	
(Type or Pfirk Name)	(Type or Print Name)	
b) The plan of conversion was adopted by the Board of Director corporation in accordance with Section 745(1)(c) of the Act.  Signed this 24 day of TWY  By	ISIgnature of Authorized Officer of Agent) Paul Gagnier (Type or Print Name)	
Complete only if the converting corporation is foreign:		
<ul> <li>The plan of convention was adopted and submitted for approaffairs of the converting foreign corporation.</li> </ul>	rval in the manner required by the law governing the internal.	
Signed this day of	Control of the second s	
 8y -	(Signature of Authorized Officer or Agent)	
	(Type or Print Name)	

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ACN Communication Services, LLC

Exhibit B

General Surety Rider Amending Bond

#### **GENERAL SURETY RIDER**

To be attached and form a part of

Bond No.: 3349232

Dated effective: 6/10/2013

(MONTH, DAY, YEAR)

executed by: ACN Communication Services, Inc., as Principal,

(PRINCIPAL)

and by: SureTec Insurance Company, as Surety,

(SURETY)

and in favor of: State of TN.

(OBLIGEE)

In consideration of the mutual agreements herein contained the Principal and the Surety hereby consent to changing

INFORMATION		ТО	
	<b>美国的基础的基础的</b>		
Principal Name	ACN Communication Ser	rvices, Inc. ACN Communication Services, LLC	2

Nothing herein contained shall vary, alter or extend any provision or condition of this bond except as herein expressly stated.

This rider is effective 7/24/2015 (MONTH, DAY, YEAR)

Signed and Sealed <u>8/18/2015</u> (MONTH, DAY, YEAR)

BY: Jane	ACN Communication Services, LLC PRINCIPAL
	TITLE
	Sure Tec Insurance Company SURETY
BY:	anlas Ram
	Angela D Ramsey, ATTORNEY NIFACT

# SureTec Insurance Company

LIMITED POWER OF ATTORNEY

Know All Men by These Presents, That SURETEC INSURANCE COMPANY (the "Company"), a corporation duly organized and existing under the laws of the State of Texas, and having its principal office in Houston, Harris County, Texas, does by these presents make, constitute and appoint

Angela D. Ramsey, Donna K. Ashley, Jennifer C. Hoehn, Wendy E. Lahm, William J. Quinn, John D. Leak, III, Wendy M. Lands

its true and lawful Attorney-in-fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include waivers to the conditions of contracts and consents of surety for:

Five Hundred Thousand and 00/100 Dollars (\$500,000.00)

and to bind the Company thereby as fully and to the same extent as if such bond were signed by the President, sealed with the corporate seal of the Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney-in-Fact may do in the premises. Said appointment shall continue in force until \_\_\_\_\_\_\_ and is made under and by authority of the following resolutions of the Board of Directors of the SureTec Insurance Company:

Be it Resolved, that the President, any Vice-President, any Assistant Vice-President, any Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

Attorney-in-Fact may be given full power and authority for and in the name of and of behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements or indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such

Attorney-in-Fact shall be binding upon the Company as if signed by the President and sealed and effected by the Corporate Secretary.

Be it Resolved, that the signature of any authorized officer and seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signature or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached. (Adopted at a meeting held on 20<sup>th</sup> of April.

In Witness Whereof, SURBTEC INSURANCE COMPANY has caused these presents to be signed by its President, and its corporate seal to be hereto affixed this 21st day of March, A.D. 2013.

State of Texas

County of Harris

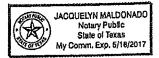
SS;

WAS ASSESSED OF THE PROPERTY O

SURETEC INSURANCE COMPANY

John Knox Jr., Presiden

On this 21st day of March, A.D. 2013 before me personally came John Knox Jr., to me known, who, being by me duly sworn, did depose and say, that he resides in Houston, Texas, that he is President of SURETEC INSURANCE COMPANY, the company described in and which executed the above instrument; that he knows the seal of said Company; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Company; and that he signed his name thereto by like order.



Jacquelyn Maldonado, Notary Public My commission expires May 18, 2017

I, M. Brent Beaty, Assistant Secretary of SURETEC INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect; and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

Given under my hand and the seal of said Company at Houston, Texas this

day of

2015 , A.D

M. Brent Beaty, Assistant Secretary

Any instrument issued in excess of the penalty stated above is totally void and without any validity.

For verification of the authority of this power you may call (713) 812-0800 any business day between 8:00 am and 5:00 pm CST.