Company ID: 00115923 -

NOS Communications, Inc. 4380 Boulder Highway Las Vegas, NV 89121

BEFORE THE TENNESSEE REGULATORY AUTHORITY

Nashville, TN

September 1, 1998

IN RE: CASE NUMBER: 98-00454

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 September 1, 1998 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.

hairman

Director

Director

ATTEST:

Executive Secretary

KELLEY DRYE & WARREN LLP

A LIMITED LIABILITY PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

1200 19TH STREET, N.W.

FACSIMILE (202) 955-9792

LOS ANGELES, CA. MIAMI, FL.

NEW YORK, N.Y.

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SUITE 500 REQUEATION, D. C. 20036

93 JUL 1 PM 2 56

EXECUTIVE GEORETARY

WRITER'S DIRECT LINE (202) 955-9767

WRITER'S E-MAIL apruitt@kelleydrye.com

June 30, 1998

VIA EXPRESS MAIL

Mr. David Waddell **Executive Secretary** Tennessee Regulatory Authority 460 James Robertson Parkway Nashville, TN 37243-0505

RECEIVED **ADMINISTRATIVE**

JUL 0 1 1997

TN REGULATORY AUTHORITY

Re:

Application of NOS Communications, Inc. for Authority to Provide

Resold Long Distance Service

Dear Mr. Waddell:

Enclosed for filing on behalf of NOS Communications, Inc., please find an original and 13 copies of an application to provide intrastate telecommunications services on a resale basis. Also enclosed is a check in the amount of \$50.00 to cover the requisite filing fee.

Finally, enclosed is a duplicate copy of this filing. Please date-stamp the duplicate and return in the envelope provided. If you have any questions regarding this filing, I can be reached at (202) 955-9767.

Sincerely,

Andrea D. Pruitt, Esq.

Rudrea D Purt

cc: Scott Troutt

VOUL- 777-100810

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KELLEY DRYE & WARREN LLP

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Sincerely,

Andrea D. Pruitt, Esq.

Rudrea D Rith

cc: Scott Troutt

115923

TENNESSEE REGULATORY AUTHORITY

Lynn Greer, Chairman Sara Kyle, Director Melvin Malone, Director



460 James Robertson Parkway Nashville, Tennessee 37243-0505

APPLICATION FOR CERTIFICATE TO PROVIDE OPERATOR SERVICES AND/OR RESELL TELECOMMUNICATION SERVICES IN TENNESSEE [RULE 1220-4-2-.57]

Name of Applicant NOS Communications, Inc.							
-	Address 4380 Boulder Highway			City Las Vegas			
State_nv	Zip Code_89121	Phone No. (_702)) <u>547 - 8692</u>	-			
Owner, Pa	urtners, or Corporate O	fficer					
NAME	ADDRESS	CITY	STATE	ZIP CODE			
el P. Delug	4380 Boulder Hwy.	Las Vegas	NV	89121			
rt Lichtenste	ein 4380 Boulder Hwy.	Las Vegas	NV	89121			
				,.			
	Name Phone No. Fax No. Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.						
	Andrea Pruitt (202) 955 - 97			•			
Andrea Pru		(202) 777 - 7707		202 1933 - 9192			
Andrea Pru Name		Phone No.		Fax No.			
Name	ree telephone number uest refunds or adjustr						
List a toll-fr and/or requ Check the Resell Operat Resell	ree telephone number uest refunds or adjustre type of telecommunication Services local services (describe)	that consumers can coments. 800-772-46 ation services you plan	call to repor	t service problems			

198907, Nashville, TN 37219-8907. Should you have any questions, call (615)741-7489, ext. 163.

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PAGE 02

reseller carriers you serve in Tennessee. Provide the above information on Appendix I.
List the state(s) that the applicant is authorized to operate in at this time. Applicant is authorized, where required, throughout the United States, except Alaska, Hawaii and Oklahoma
For the above states, list the number and types of complaint(s) filed against applicant, and the complaint(s)' current status. Provide this information on a separate attachment, if necessary. See Exhibit A.
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.
List any states that the applicant has been denied authority to provide service. None.
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.
Areas in Tennessee to be served. Statewide.
What type of customers will the applicant serve? a. Businessx_ b. Residential_x_ c. Aggregators
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, N_0
Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers' price for similar services? Yesx_No
Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II ¹ .
What is the applicant's 10XXX or 800 access code, if applicable?
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 Tarlff form. Failure to fill out this form will cause the applicant's request to be rejected.
²A copy of a bill is required if the applicant is going to bill the customer directly.

R.	Describe briefly how the applicant plans to market their services in Tennessee? If an independent telemarketer is going to be used, state company name and address. NOS will market through in-person sales calls, phone solicitation, television.				
	print and radio advertising.				
S.	Describe the procedures the applicant will use to switch a consumer's preferred interexchange service, if applicable. In compliance with FCC rules, NOS will yerify PIC changes using a Letter of Authorization or an independent third party agent.				
T.	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				
U.	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. YesX_ No				
<u>Part</u>	II: Organization Structure				
Α.	Type of Organization				
***************************************	IndividualX _Corporation				
	Partnership Other (Explain on separate sheet)				
B.	 If partnership and/or Non-resident (1) Attach a copy of Articles of Incorporation and current by-laws. See Exhibit B. (2) Attach a copy of Certification of Authority issued by Tennessee Secretary of State showing corporation's authority to engage in business in Tennessee. See Exhibit C. 				
<u>Part</u>	III: Financial Information				
Α.	Attach a current financial statement showing 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. See Exhibit D.				
Part	IV: Display Card				
which	plicable, attach a copy of the display card to be placed on the aggregators telephone h shows what operator services are to be provided. The card must contain all required mation listed in the attached Rule (1220-4-257, B) ³ , which includes a toll-free number				

³It is the responsibility of the reseller or operator service provider to assure that the appropriate display card is affixed to the aggregates telephones.

consumers can call for service problems and refunds.

Part V: Rule Compliance Agreement

- A. The Reseller or Operator Service Provider applicant, hereby, affirms the following:
- Has received, read, and understands the Tennessee Regulatory Authority's (TRA)
 Reseller Rules and Regulations, (Appendix III)
- Understands the penalties for non-compliance, and all associated fees to provide such service.
- Will comply with the TRA Reseller Rules and all other applicable Authority Rules and state laws, including T.C.A. Section 65-5-206 (Appendix IV),
- That all information provided in the attached registration document is true to the best of my knowledge.

NOS Communications, Inc.

Company Name

Date

Company Official

Title

Subscribed and sworn

Notary Public

Notary Public-State Of Nevada County Of Clark KIMBERLY K. DEL ROSARIO My Appointment Expires No: 97-0271-1 January 14, 2001 seal

Secretary of State **Corporations Section** ames K. Polk Building, Suite 1800 ille. Tennessee 37243-0306 N

DATE: 07/28/95 REQUEST NUMBER: 3036-0259 TELEPHONE CONTACT: (615) 741-0537 FILE DATE/TIME: 07/27/95 0936 EFFECTIVE DATE/TIME: 07/27/95 0936 CONTROL NUMBER: 0298095

TO: HELEIN & WAYSDORF PC 1850 M ST NW S550 WASHINGTON, DE 20036

RE: NOS COMMUNICATIONS, INC. APPLICATION FOR CERTIFICATE OF AUTHORITY - FOR PROFIT

WELCOME TO THE STATE OF TENNESSEE. THE ATTACHED CERTIFICATE OF AUTHORITY HAS BEEN FILED WITH AN EFFECTIVE DATE AS INDICATED ABOVE.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DATE OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE CORPORATION'S FISCAL YEAR. PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION OF THE CORPORATION'S FISCAL YEAR. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE CORPORATION 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 CORPORATION TO ADMINISTRATIVE REVOCATION OF ITS CERTIFICATE OF AUTHORITY.

. IN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE.

FOR: APPLICATION FOR CERTIFICATE OF AUTHORITY - FOR PROFIT

FROM:
NOS COMMUNICATIONS
SUITE 811
6701 DEMOCRACY BLVD.
BETHESDA, MD 20817-0000

RECEIVED:

ON DATE: 07/27/95

FEES \$300.00 \$300.00

TOTAL PAYMENT RECEIVED: \$600.00

RECEIPT NUMBER: 00001831933 ACCOUNT NUMBER: 00218733

55-44>6

RILEY C. DARNELL SECRETARY OF STATE