

Commonwealth of Kentucky Public Service Commission

INFORMATION FORM FOR TELEPHONE UTILITIES OPERATING PURSUANT TO KRS 278.541 through 278.544

Complete Name of Telephone Utility: Affiniti Ventures, Inc.

Physical Address of Principal Office: Street: 262 W 38th Street, Suite 1002

City: New York State: NY Zip: 10018

Primary Contact: Name: Ethan Dunn Title: COO

Phone: 727-916-1793 Fax: _____

E-Mail: ethan@noblemobile.com

Person Responsible for Answering Consumer Complaints: Name: Ethan Dunn Title: COO

Address (if different from above) Street: Same as above

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

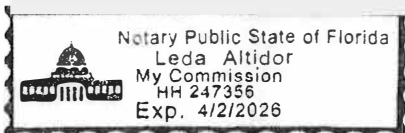
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Ethan Dunn, on behalf of Affiniti Ventures, Inc. do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this _____ day of _____, 2024.

UTILITY: Affiniti Ventures, Inc.

BY: [Signature]

STATE OF Florida
COUNTY OF Sevier

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 13th day of January, 2025.



[Signature]
NOTARY PUBLIC

My Commission Expires: 04/02/2026

