

**Commonwealth of Kentucky  
Public Service Commission**

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**DEC 18 2024**

**PUBLIC SERVICE  
COMMISSION**

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

Complete Name of Telephone Utility: Axxess Networks, LLC

Physical Address of Principal Office: Street: 650 Sentry Parkway, Suite 1

City: Blue Bell State: PA Zip: 19422

Primary Contact: Name: Jason Flanigan Title: COO

Phone: 610-490-8043 Fax: \_\_\_\_\_

E-Mail: jflanigan@axxessnetworks.com

Person Responsible for Answering Consumer Complaints: Name: Jason Flanigan Title: COO

Address (if different from above)

Street: Same as above

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: 610-833-9000 Fax: \_\_\_\_\_

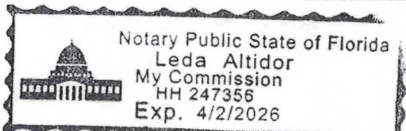
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Mark Lammert, on behalf of Axxess Networks, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 18th day of December, 2024.

UTILITY: Axxess Networks, LLC

BY: *Jason Flanigan*

STATE OF Florida  
COUNTY OF Seminole

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 18th day of December, 2024.



*Leda Altidor*  
NOTARY PUBLIC

My Commission Expires: 04/02/2026

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**12/19/2024**  
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