

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: DVS Technologies LLC

Physical Address of Principal Office: Street: 150 N Durango Drive
 City: Las Vegas State: NV Zip: 89145

Primary Contact: Name: Russell Goeckner Title: President/Treasurer
 Phone: 702-938-8000 Fax: 702-938-8001
 E-Mail: accounting@dvst.com

Person Responsible for Answering Consumer Complaints: Name: Russell Goeckner Title: President/Treasurer
 Address (if different from above)
 Street: same as above
 City: _____ State: _____ Zip: _____
 Phone: 702-938-5000 Fax: 702-938-8001

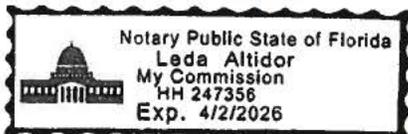
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Mark Lammert, Attorney-in-Fact, on behalf of DVS Technologies LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this _____ day of July, 2022.

UTILITY: DVS Technologies LLC

BY: Mark Lammert


STATE OF Florida
 COUNTY OF Seminole

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 27th day of July, 2022.



Leda Altidor
 NOTARY PUBLIC

My Commission Expires: 04/02/2026

