

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: Blue Casa Mobile, LLC

Physical Address of Principal Office: Street: 114 E. Haley Street, Suite A
 City: Santa Barbara State: CA Zip: 93101

Primary Contact: Name: Mark Lammert Title: Tax Preparer
 Phone: 407-260-1011 Fax: 407-260-1033
 E-Mail: mark@csilongwood.com

Person Responsible for Answering Consumer Complaints:	Name: <u>Nancy Ford</u> Title: <u>Accounting Manager</u>
	Address (if different from above)
	Street: <u>114 E. Haley Street, Suite A</u>
	City: <u>Santa Barbara</u> State: <u>CA</u> Zip: <u>93101</u>
	Phone: <u>805-560-0728</u> Fax: _____

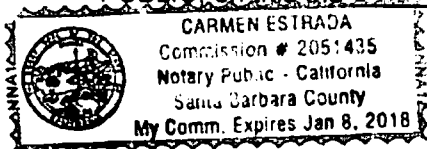
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Jeff Compton, on behalf of Blue Casa Mobile, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 30th day of November, 2016.

UTILITY: Blue Casa Mobile, LLC

BY: [Signature] Jeff Compton

STATE OF California
 COUNTY OF Santa Barbara

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 30 day of Nov, 2016.



[Signature]

NOTARY PUBLIC

My Commission Expires: 1/8/2018

