

Rev. 11/3/2010

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: Mosaic Networx, LLC

Physical Address of Principal Office: Street: 700 Larkspur Landing Circle Suite 214
 City: Larkspur State: CA Zip: 94939

Primary Contact: Name: Mark Lammert Title: Attorney-in-Fact
 Phone: (407) 260-1011 Fax: (407) 260-1033
 E-Mail: regulatory@csilongwood.com

Person Responsible for Answering Consumer Complaints:	Name: <u>Kathi Keane</u> Title: <u>Director</u>
	Address (if different from above) Street: <u>700 Larkspur Landing Circle Suite 214</u>
	City: <u>Larkspur</u> State: <u>CA</u> Zip: <u>94939</u>
	Phone: <u>415-877-1460</u> Fax: _____

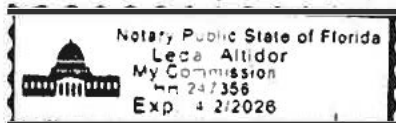
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Kathi Keane, on behalf of Mosaic Networx, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 14th day of August, 2023.

UTILITY: Mosaic Networx, LLC

BY: *Kathi Keane*
DocuSigned by:
787B62F8774E411

STATE OF Florida
 COUNTY OF Seminole

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 14th day of August, 2023.



Leda Altidor
 NOTARY PUBLIC

My Commission Expires: 04/02/2026

