

### 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: StuppFiber, LLC

Physical Address of Principal Office: Street: 445 Century Street  
 City: Bowling Green State: KY Zip: 42104

Primary Contact: Name: John Stupp III Title: Authorized Representative  
 Phone: (833) KYFIBER Fax: (314) 638-2660  
 E-Mail: jstupp@stupp.com

Person Responsible for Answering Consumer Complaints:	Name: <u>Joe McClung</u> Title: <u>Authorized Representative</u>
	Address (if different from above)
	Street: _____
	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, Joe McClung, on behalf of StuppFiber, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 25<sup>th</sup> day of March, 2022.

UTILITY: StuppFiber, LLC

BY: *J. McClung*

STATE OF KENTUCKY  
COUNTY OF WARREN

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 25<sup>th</sup> day of March, 2022.

*Mitchell S. ...* ID # 607503  
NOTARY PUBLIC

My Commission Expires: 9/8/22

