

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: Flex Mobile Inc.

Physical Address of Principal Office: Street: 3773 Howard Hughes Pkwy South, Suite 590
City: Las Vegas State: NV Zip: 89169

Primary Contact: Name: John Ripley Title: President
Phone: 720-722-2070 Fax: None
E-Mail: jripley@getflexmobile.com

Person Responsible for Answering Consumer Complaints:	Name: <u>John Ripley</u> Title: <u>President</u>
	Address (if different from above)
	Street: <u>same as above</u>
	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, Mark Lammert, on behalf of Flex Mobile Inc. do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 12th day of July, 2025.

UTILITY: Flex Mobile Inc.

BY: 

STATE OF Florida
COUNTY OF Seminole

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 12 day of July, 2025.


NOTARY PUBLIC

My Commission Expires:



RECEIVED

8/20/2025

PUBLIC SERVICE
COMMISSION
OF KENTUCKY