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:	TREK CELLULAR, LLC		
Physical Address of Principal Office:	Street: 101 Log Canoe Circle, Suite E		
	City: Stevensville	State: MD Zip: 21666	
Primary Contact:	Name: Allen Raub	Title: CEO	
	Phone: 410-924-7203	Fax: <u>804-895-7852</u>	
	E-Mail: allen.raub@trekcellular.com		
Person Responsible	Name: Allen Raub	Title: CEO	
for Answering Consumer Complaints:	Address (if different from above)		
	Street:101 Log Canoe Circle, Suite E		
	City:Stevensville	State: <u>MD</u> Zip: <u>21666</u>	
	Phone: 4109247203	_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, <u>Allen Raub</u>, on behalf of <u>TREK CELLULAR</u>, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this <u>9th</u> day of <u>May</u>, 20²⁴.

UTILITY:

TREK CELLULAR, LLC

BY:

Allen Edward Raub

STATE OF Florida COUNTY OF BROWARD

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the ______ day of ______, 20_24 . Sworn to (or affirmed) and subscribed

	PETA-GAYE ANDERSON	by Allen Edward Raub	Or a laborer	RECEIVED	
	Notary Public - State of Florida Commission # HH 102153		Peter Cap Anderen	5/15/2024	
	Expires on March 9, 2025	NOTARY PUBLIC			
	niroc: 03/09/2025	Peta-Gaye Anderson	PUBLIC SERVICE		
My Commission Expires: _		xpires:	Type of ID produced: MD		

Notarized remotely online using communication technology via Proof. ____ Personally Known OR 🟒 Produced Identification