KELLEY DRYE & WARREN LLP

A LIMITED LIABILITY PARTNERSHIP

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CHICAGO, IL STAMFORD, CT

PARSIPPANY, NJ

BRUSSELS, BELGIUM

HONG KONG

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WASHINGTON, D.C. 20036

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(202) 955-9792

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July 21, 2000



Mr. Martin Huelsmann **Executive Director** Commonwealth of Kentucky **Public Service Commission** 211 Sower Blvd. Frankfort, KY 40602

> Re: SNiP Link, LLC Notice of Intent to Provide Resold Interexchange

Telecommunications Service In the Commonwealth of Kentucky

Dear Mr. Huelsmann:

Enclosed for filing on behalf of SNiP Link, LLC are an original and three (3) copies of SNiP Link, LLC 's Notice of Intent to Provide Resold Interexchange Telecommunications Service in the Commonwealth of Kentucky.

Please date-stamp the enclosed extra copy of this filing and return it in the selfaddressed, postage-prepaid envelope provided. Should you have any questions, please do not hesitate to contact me at (202) 955-9600.

Respectfully submitted,

Enclosures

SNIP LINK, LLC

NOTICE OF INTENT TO PROVIDE

RESOLD TELECOMMUNICATIONS SERVICE

IN THE COMMONWEALTH OF KENTUCKY

RECEIVED

JUL 24 2000

PUBLIC SERVICE
COMMISSION

In accordance with the Kentucky Public Service Commission's Order in Exemptions for Interexchange Carriers, Long Distance Resellers, Operator Service Providers and Customer-Owned, Coin-Operated Telephones, Administrative Case No. 359 (June, 21 1996), SNiP Link, LLC ("SNiP Link" or "Company") respectfully submits this Notice of Intent to Provide Resold Intrastate Interexchange services (including resold operator services) in the Commonwealth of Kentucky ("Notice"). In support of this Notice, SNiP Link submits the following information:

I. NAME, ADDRESS, AND TELEPHONE NUMBER OF THE COMPANY

The name, address, and telephone number of the Company are:

SNiP Link, LLC 100-A Twinbridge Drive Pennsauken, NJ 08110 Telephone: (856) 662-8640 Facsimile: (856) 662-8641

II. CERTIFICATE OF FORMATION

SNiP Link is a limited liability company organized under the laws of New Jersey. Copies of the Company's Certificate of Formation and Kentucky Certificate of Authority are appended hereto as *Exhibits A and B*.

III. CONTACTS

A. <u>Customer Complaints</u>

The toll-free number of the Company is available 24 hours/day, 7 days/week for Company's customers. That number is (888) 764-7600.

B. Corporate Contact

SNiP Link's contact for customer complaints and regulatory issues is:

Joseph A. Polito, Jr.
Director of Telecommunications Sales
SNiP Link, LLC
100-A Twinbridge Drive
Pennsauken, NJ 08110
Telephone: (856) 662-8640
Facsimile: (856) 662-8641

C. <u>Designated Contacts for Notice</u>

The designated contact for questions regarding this Notice is:

Michael C. Engel Kelley Drye & Warren LLP 1200 19th Street, N.W., Suite 500 Washington, D.C. 20036 Telephone: (202) 955-9600 Facsimile: (202) 955-9792

Copies of all correspondence, notices, inquiries and orders also should be sent to the following person:

Joseph A. Polito, Jr.
Director of Telecommunications Sales
SNiP Link, LLC
100-A Twinbridge Drive
Pennsauken, NJ 08110
Telephone: (856) 662-8640
Facsimile: (856) 662-8641

IV. NOTARIZED STATEMENT

A notarized statement by an officer of SNiP Link is appended hereto as *Exhibit C*. The company has not provided or collected for intrastate service in Kentucky prior to filing this Notice.

V. <u>SERVICE TO AGGREGATORS</u>

In the event that Company chooses to provide operator-assisted calling to its customers it will comply fully with the Commission's mandates in Administrative Case No. 330.

VI. PROPOSED TARIFF

SNiP Link appends hereto as Exhibit D its proposed tariff for interexchange telecommunications service. This tariff is submitted to become effective thirty (30) days from the date of this filing.

Respectfully submitted,

SNIP LINK, LLC

Bv:

Michael C. Engel

KELLEY DRYE & WARREN LLP 1200 19th Street, N.W., Suite 500

Washington, D.C. 20036

Its Attorney

Dated: July 21, 2000

EXHIBIT AARTICLES OF INCORPORATION

FILED

CERTIFICATE OF FORMATION

OF

JUL 28 1998

SNIP LINK, L.L.C.

James A. Diklautario, Jr. Stata Trassurar

This Certificate of Formation of SNIP LINK, L.L.C. dated this 28th day of July, 1998, is being duly executed and filed by R. W. Worthington, as an authorized person, to form a limited liability company under the New Jersey Limited Liability Company Act.

1. The name of the limited liability company is

SNIP LINK, L.L.C.

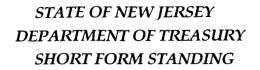
- 2. The address of the registered office in the State of
 New Jersey is 311 Fairway Corporate Center, 4300 Haddonfield Road,
 Pennsauken, NJ 08109 and the name of the initial registered agent
 at such address is Lee Silverstein, Esquire.
- 3. The duration of the limited liability company's existence shall be perpetual.

The undersigned represents that this Limited Liability Company has two or more members, and that this filing complies with the requirements detailed in NJSA 42. The undersigned hereby attests that he is authorized to sign this certificate on behalf of the Limited Liability Company.

Dated: July 28, 1998

R. W. Worthington Authorized person

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SNIP LINK, L.L.C.

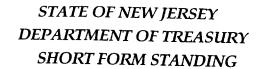
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on July 28, 1998.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Lee Silverstein Esq 311 Fairway Corporate Center 4300 Haddonfield Road Pennsauken, NJ 08109

Continued on next page . . .



SNIP LINK, L.L.C.

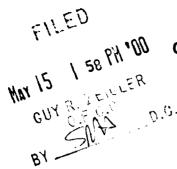
IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of April, 2000

Rams mmachuls

Roland M Machold Treasurer

EXHIBIT B KENTUCKY CERTIFICATE OF AUTHORITY



SLL-902 (2/98)

COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III SECRETARY OF STATE



0494527.06

John Y. Brown III Secretary of State

Received and Filed 05/15/2000 12:12 PM

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of KRS Chapter 275, t Kentucky on behalf of the limited liability company na	the undersigned he med below and for	ereby applies for that purpose sub-	authority to tra mits the following	nsact business in Statements: \$30.1
The company is a limited liability company (LLC). a professional limited liability company (PLLC).			\$	sperry - L902
2.The name of the limited liability company is SNIP Link, L.L.C.				
3. The name of the limited liability company to be use SNIP Link, L.L.C.				·
·	real name" is unavailable for us	•		
4. New Jersey is the state	te or country of orga	anization.		
5. July 28, 1998 is the dat of dissolution, the latest date upon which the limited	te of organization a d liability company i			nas a specific date
 The street address of the office required to be main office address is 	tained in the state	of formation or, if	not so required, t	he principal
100-A Twinbridge Dr., Pennsauken, NJ 08110) 			
7. The names and usual business addresses of the cu Anthony Abate		any, are as follows		o
Name Peter M. Cava	100-A Twinbr	idge Dr., Penns	ddress sauken, NJ 081:	10
Name (Attach	a continuation, if necessary)	A	ddress	· · · · · · · · · · · · · · · · · · ·
8.The street address of the registered office in Kentuc				
421 West Main Street		Frankfort	Kentucky	40601
and the name of the registered agent at that office i Corporation Service Company d/b/a/ CSC-Law	s yers Incorporati	City ng Service Com	State	Zip Code
9. This application will be effective upon filing, unless	a delayed effective	date and/or time	is specified:	*
(Delayed effective date and/or time)	•			
certify that, as of the date of filing this application, iability company under the laws of the jurisdiction of i	, the above-named its formation.	limited liability c		exists as a limited
	-4		Signature 23 TE SPETU L or Print Name & Title	en
Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company	Date . consent to se		gent on behalf of the li	mited liability company.
Type or print name of registered agent STATE OF KENTUCKY, COUNTY OF FRANKLIN, SCI	M.	De F Cu	Little 1	mad liability Witipariy.
I, GUY R. ZEIGLER, CLERK OF SAID COUNTY, HEREBY THAT THE FOREGOING INSTRUMENT HAS BEEN DULY RE BOOK TO BOOK THE BOOK TO BE THE BOOK THE BO	CERTIFY Man	16 1 4/1/4	Registered Agent Frint Name & Title	554 Sec.

SAID OFFICE (See attached sheet for instructions)

EXHIBIT C NOTARIZED STATEMENT

VERIFICATION

State of New Jersey	
County of <u>Cander</u>)	
Joseph A. Polito, Jr. makes oath and says that he is of SNiP Link, LLC that he has examined the foreknowledge, information, and belief, all statements of true, and the said application is a correct statement of named applicant in respect to each and every matter s	going application and that to the best of his fact contained in the said application are the business and affairs of the above-
	(Signature of affiant)
Subscribed and sworn to before me, a Notary Public/	MINA Staiman (Title of person authorized to administer oaths)
in the State and County above named, this 2/day of_	JUNE, 2000
	Nina Staiman
	(Signature of person authorized to administer oath)
	Subtraction of the Communication of the Communicati

EXHIBIT D

PROPOSED INTEREXCHANGE TELECOMMUNICATIONS SERVICE TARIFF