OFFICE OF SECRETARY OF STATE
Corporations Division
313 West Tower, #2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334
404-656-2817
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Brian P. Kemp
Secretary of State

APPLICATION TO AMEND, TRANSFER OR TERMINATE A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY

Personally appeared before me the undersigned being duly sworn according to law, and swears to the facts contained in this application. Pursuant to Georgia Code Section (O.C.G.A.)36-76-5, as amended, the undersigned hereby applies to amend a state-issued Certificate of Franchise Authority.

(Please type or print clearly)

1. The name of the Certificate Holder is:
   James Cable, LLC

2. The principal place of business for the Certificate Holder is:
   15 Braintree Hill Office Park, Suite 102
   Braintree, MA 02184

3. The Certificate License Number is:
   VF08-0010

4. Statement of Amendment(s)

✓ **a. Change of Principal Mailing Address and/~~or~~ Officers**

Name	*Title*	*Address*
Catherine Adams	CEO	Same as above
Gil Nichols	COO	Same as above
George Psyllos	CFO	Same as above

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✓ **b. Change in Service Area:**
Pursuant to O.C.G.A 76-36-5 (4)(d) A cable service provider or video service provider may modify its service area covered by the state franchise by notifying the Secretary of State of changes to the service area, with a copy provided to each affected municipal or county governing authority, **at least 20 days** prior to the effective date of such change. Such notification shall contain a geographic description of the new service area or areas and a list of each municipal or county governing authority within the service area. The service areas are described below and/or on an attached map as follows: [If providing a coverage map(s), please label them "Exhibit A" on 8.5 by 11 paper size.]

This service area change is effective on: 11/21/2011.
(MM/DD/YYYY).

Change In Service Area Description:

In addition to the existing service area of Eatonton, GA, City (GA 0295), the following service areas will be added:

1. Ambrose, GA, City (GA0822)
2. Broxton, GA, City (GA0404)
3. Douglas, GA, City (GA0015)
4. Nicholls, GA, City (GA0437)
5. Coffee County, GA (GA0794)

List any outstanding liabilities that have become due and are still owed to Municipal or county governing authority under a state franchise issued pursuant to this chapter shall be fully transferable under this Code section to any successor in interest to the applicant. [O.C.G.A 76-36-5 (4)(b)].

☐ **c. Notice of Transfer of Interest**

Pursuant to O.C.G.A 36-76-5, A state franchise shall be fully transferable to any successor in interest to the applicant. A notice of transfer shall be filed by the transferee with the Secretary of State with a copy provided to each affected municipal or county governing authority **within 45 days of such transfer.** The transfer notification shall consist of an affidavit signed by an officer or general partner of the transferee. **Please complete the following:**

5. The name of the applicant is:

_____

6. The principal place of business for the applicant is:

_____

7. The principal executive officers of the applicant are:

Name	*Title*	*Address*

8. By submitting this application, the applicant agrees to comply will all applicable federal and state laws and regulations, including municipal and county ordinances and regulations regarding the placement and maintenance of facilities in the public right of way that are generally applicable to all users of the public right of way and specifically including O.C.G.A. Chapter 9 of Title 25, the 'Georgia Utility Facility Protection Act'.

9. Pursuant to OC.G.A> 36-76-4©(2), the service areas are described below and/or on an attached map as follows: [If providing a coverage map(s), please label them "Exhibit A" on 8.5 by 11 paper size.]

Service Area Description:

In addition to the existing service area of Eatonton, GA, City (GA0298), the following service areas will be added:

1. Ambrose, GA, City (GA0822)
2. Broxton, GA, City (GA0404)
3. Douglas, GA, City (GA0015)
4. Nicholls, GA, City (GA0437)
5. Coffee County, GA (GA0794)

10. Describe any material changes, if any of the information set forth in the original applicant's initial application for a statewide franchise.

11. List any outstanding liabilities that have become due and are still owed to Municipal or county governing authority under a state franchise issued pursuant to this chapter shall be fully transferable under this Code section to any successor in interest to the applicant. [O.C.G.A 76-36-5 (4)(b)].

12. The applicant certifies that the following counties and municipalities have been provided with a copy of this application pursuant to O.C.G.A 36-76-4 (a) and with notice to designate a franchise fee pursuant to O.C.G.A. 36-76-6.

The Cities of Ambrose, Braxton, Douglas and Nicholls, GA, and the County of Coffee, GA.

13. By submitting this application the applicant agrees to pay to each affected local governing authority a franchise fee established by such local governing authority which shall not exceed the maximum percentage rate permitted in 47 U.S.C. Section 542(b) of the applicant's gross revenues received from the provision of cable service or video service to subscribers located within the service area. Such franchise fee shall be paid directly to each affected local governing authority within 30 days after the last day of each calendar quarter.

☐ **d. Notice of Intent to Terminate Service.**

Pursuant to O.C.G.A 36-76-5 (e) A state franchise issued pursuant to this chapter may be terminated by the cable service provider or video service provider by submitting a notice of termination to the Secretary of State with a copy provided to each affected municipal or county governing authority. Such notice shall identify the cable service provider or video service provider, the affected service area, and the effective date of such termination, **which shall not be more than 60 days from the date of filing the notice of termination.**

This effective date for this termination of service is _____.
(MM/DD/YYYY).

Submitted this 1st day of November in the year 2011.

Sworn and subscribed before me, this _____ day of _____ in the year _____.

Notary Public
My Commission expires
6/6/12

Signature of Officer/
General Partner

Catherine Adams, CEO
Type or Print Name and Title

15 Braintree Hill Office Park, Suite 102
Braintree, MA 02184
Address

781-356-8701
Telephone

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