

** FLORIDA PUBLIC SERVICE COMMISSION **

DIVISION OF COMMUNICATIONS BUREAU OF SERVICE EVALUATION

APPLICATION FORM for AUTHORITY TO PROVIDE SHARED TEMANT SERVICE WITHIN THE STATE OF FLORIDA

INSTRUCTIONS

- A. This form is used as an application for an original certificate and for approval of the assignment or transfer of an existing certificate. In case of an assignment or transfer, the information provided shall be for the assignee or transferee (See Appendix A).
- B. Print or type all responses to each item requested in the application and appendices. If an item is not applicable, please explain why.
- C. Use a separate sheet for each answer which will not fit the allotted space.
- D. Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of <u>\$100.00</u> to:

Florida Public Service Commission Division of Records and Reporting 2540 Shumerd Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6770

Note: No filing fee is required for a assignment or transfer of an existing certificate to another certificated company.

E. If you have questions about completing the form, contact:

Florida Public Service Commission Division of Communications Bureau of Certification and Evaluation 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6600

- 1. This is an application for (check one):
 - (X) **Original certificate** (new company)
 - () Approval of transfer of existing certificate: Example, a certificated company purchases an existing company and desires to retain the original certificate authority.
 - () Approval of assignment of existing certificate: Example, a noncertificated company purchases an existing company and desires to retain the certificate of authority rather than apply for a new certificate.
 - () Approval for transfer of control of existing certificate: <u>Example</u>, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.

2. Name of company:

Cypress Communications, Inc.

3. Name under which applicant will do business (fictitious name, etc.):

Cypress Communications of South Florida, Inc.

4. Official mailing address (including street name & number, post office box, city, state, and zip code):

Fifteen Piedmont Center

Suite 710

Atlanta, GA 30305

 Florida address (including street name & number, post office box, city, state, and zip code):

1401 Brickell Ave., Suite 309

Miami, FL 33131

6. Structure of organization:

Ċ	j	Individual Foreign Corporation General Partnership () Other,	())	Corporat Foreign Limited	Partnership
				_		

7. If individual, provide:

Name :		
Title :		
Address:		
City/State/Zip:		
Telephone No.:	Fax No.:	
Internet E-Mail Address:		
Internet Website Address:		

8. If incorporated in Florida, provide proof of authority to operate in Florida:

- (a) Florida Secretary of State corporate registration number: _____.
- 9. <u>If foreign corporation</u>, provide proof of authority to operate in Florida:
 - (a) Florida Secretary of State Corporate registration number: F9900005375
- 10. <u>If using fictitious name-d/b/a</u>, provide proof of compliance with the fictitious name statute (Chapter 865.09 FS) to operate in Florida.
- 11. <u>If applicant is a limited liability partnership</u>, provide proof or registration to operate in Florida.
 - (a) The Florida Secretary of State registration number: ______.

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12. If a partnership, provide name, title and address of all partners and a copy of the partnership agreement.

a.	Nase :			
	Title :			
	Address:	····		
	City/State/Zip:			
	Telephone No.:_		Fax No.:	
	Internet E-Mail	Address:		
	Internet Website	e Address:		
b.	Name :			
<i>.</i>	Title :			
	Address:			
	City/State/Zip:			
	Telephone No.:_			
	Internet E-Mail			
	Internet Website			
	TUCELIEC MEDSIC	e Auuress:	······································	
13. <u>If</u> compli 620.10	a foreign 11 iance with the 1 59, FS), if appl	<mark>imited part</mark> foreign limite icable.	nership, provi 19 partnership	de proof of statute (Chapter
	(a) The Florid		n number:	
		-		
14. Provid	de <u>FEID Number</u> (†	f applicable):	58+2330270	
15. Who w	ill bill for you	r services.		
	Name :_	Cypress Comm	inications, Inc.	·
	Address:_	Fifteen Piedu	nont Center, Sui	Lte 710
	City/Stat	e/Zip: <u>Atlan</u>	ta, GA 30305	
	Telephone	Number: 404	-869-2500	
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- 16. Who will serve as liaison to the Commission with regard to the following?
 - (a) The application:
 - Name : Eric D. Edmondson
 - Title : Attorney, Arent Fox Kintner Plotkin & Kahn, PLLC

Address: 1050 Connecticut Avenue, N.W.

City/State/Zip: Washington, D.C. 20036

Telephone No.: 202/857-6160 Fax No.: 202/857-6395

Internet E-Mail Address: edmondse@arentfox.com

Internet Website Address: www.arentfox.com

- (b) Official point of contact for the ongoing operations of the company:
 - Robert W. McCarthy

Title : Vice President and General Counsel

Address: Fifteen Piedmont Center, Suite 710

City/State/Zip: Atlanta, GA 30305

Telephone No.: <u>404/869-2500</u> **Fax No.:** <u>404/869</u>~2525

Internet E-Mail Address: rmccarthy@cypresscom.net

Internet Website Address: www.cypresscom.net

(c) Complaints/Inquiries from customers:

Name : Robert W. McCarthy

Title : Vice President and General Counsel

Address: Fifteen Piedmont Center, Suite 710

City/State/Zip: Atlanta, GA 30305

Telephone No.: 404/869-2500 Fax No.: 404/869-2525

Internet E-Mail Address: rmccarthy@cypresscom.net

Internet Website Address: www.cypresscom.net

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- 17. List the states in which the applicant:
 - (a) has applications pending to be certificated as a shared tenant service provider.

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N/A

(b) is certificated to operate as a shared tenant service provider.

N/A

(c) has been denied authority to operate as a shared tenant service provider and the circumstances involved.

N/A

(d) has had regulatory penalties imposed for violations of telecommunications statutes and the circumstances involved.

N/A

(e) has been involved in civil court proceedings with an interexchange carrier, local exchange company or other telecommunications entity, and the circumstances involved.

N/A

- 18. Indicate if any of the officers, directors, or any of the ten largest stockholders have previously been:
 - a. Adjudged bankrupt, mentally incompetent. or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, provide explanation.

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None.

b. Officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

No.

- 19. Submit the following:
 - A. Financial capability.

The application <u>must contain</u> the applicant's audited financial statements for the most recent 3 years. If the applicant does not have audited financial statements, it shall so be stated.

The unaudited financial statements must be signed by the applicant's chief executive officer and chief financial officer <u>affirming that</u> the financial statements are true and correct and must include:

- 1. the balance sheet.
- 2. income statement, and
- 3. statement of retained earnings.

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

Further, the following (which includes supporting documentation) must be provided:

1. <u>A written explanation</u> that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.

2. <u>A written explanation</u> that the applicant has sufficient financial capability to maintain the requested service.

3. <u>A written explanation</u> that the applicant has sufficient financial capability to meet its lease or ownership obligations.

- B. Hanagerial capability; give resumes of employees/officers of the company that would indicate sufficient managerial experiences of each.
- C. Technical capability; give resumes of employees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance.

** APPLICANT ACKNOWLEDGEMENT STATEMENT **

- 1. REGULATORY ASSESSMENT FEE: I understand that all telephone companies must pay a regulatory assessment fee in the amount of <u>.15</u> of one percent of the gross operating revenue derived from intrastate business. Regardless of the gross operating revenue of a company, a minimum annual assessment fee of \$50 is required.
- GROSS RECEIPTS TAX: I understand that all telephone companies must pay a gross receipts tax of two and one-half percent on all intra and interstate business.
- 3. SALES TAX: I understand that a seven percent sales tax must be paid on intra and interstate revenues.
- 4. APPLICATION FEE: I understand that a non-refundable application fee of \$250.00 must be submitted with the application.

JTILITY OFFICI	Signature	13 March 00 Date
	Vice President & General Counse Title	1 404/869-2500 Telephone No.
Address:	Cypress Communications, Inc.	404/869-2525 Fax No.
	Fifteen Piedmont Center, Suite	
	Atlanta, GA 30305	

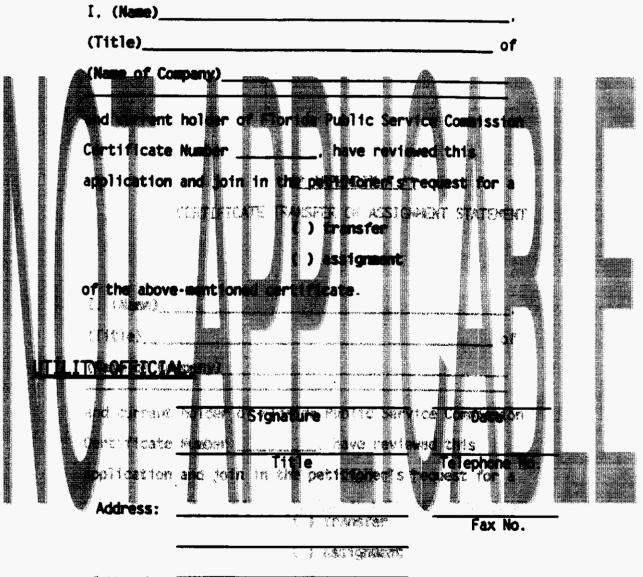
ATTACHMENTS:

- A CERTIFICATE TRANSFER, OR ASSIGNMENT STATEMENT
- **B** CUSTOMER DEPOSITS AND ADVANCE PAYMENTS
- C AFFIDAVIT

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** APPENDIX A **

CERTIFICATE TRANSFER OR ASSIGNMENT STATEMENT



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** APPENDIX B **

CUSTOMER DEPOSITS AND ADVANCE PAYMENTS

A statement of how the Commission can be assured of the security of customer deposits and advance payments may be responded to in one of the following ways (applicant please check one):

- ($_X$) The applicant will not collect deposits nor will it collect payments for service more than one month in advance.
- () The applicant intends to collect deposits and/or advance payments for more than one month's service and will file and maintain a surety bond with the Commission in an amount equal to the current balance of deposits and advance payments in excess of one month. (The bond must accompany the application.)

UTILITY OFFICI/	Butw M' Catty Signature	13 March 00 Date
	Vice President & General Couns Title	e1 404/869-2500 Telephone No.
Address:	<u>Cypress Communications, Inc.</u> Fifteen Piedmont Center, Suite Atlanta GA 30305	<u>404/869-2525</u> Fax No. 710

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** APPENDIX C **

AFFIDAVIT

By my signature below. I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise. managerial ability, and financial capability to provide interexchange telecommunications service in the State of Florida. I have read the foregoing and declare that, to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

I will comply with all current and future Commission requirements regarding shared tenant service. I understand that I am required to pay a regulatory assessment fee (minimum of \$50.00 per calendar year) and pay gross receipts tax. Furthermore, I agree to keep the Commission advised of any changes in the names or addresses listed in the application within 10 days of the change.

Further, I am aware that, pursuant to Chapter 837.06, Florida Statutes, "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s. 775.083."

UTILITY OFFICIA Signature	-2 $+1$ $)MA(-++$	Date: 13/harh 00		
•	Robert W, McCarthy			
Title	Vice President & General Coun	sel		
Address:	Address: Cypress Communications, Inc.			
		Telephone No. 404/869-2525		
	Suite 710	Fax No.		
	Atlanta, GA 30305			

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Item No. 19

All financial information requested in Item 19 is provided in the attached Prospectus, which was published in connection with Cypress Communications, Inc.'s initial public offering. The Prospectus is on file with the U.S. Securities and Exchange Commission. All financial information contained in the Prospectus has been affirmed by Cypress Communications' chief executive officer as being true and correct.

The portions of the Prospectus relevant to each topic of information are set forth below.

A. Financial Capability

Cypress Communications' audited financial statements for the past three years are reproduced at pages F-3 through F-6 of the Prospectus.

Cypress Communications has sufficient financial capability to provide and maintain Shared Tenant Services to its customers in Miami, as well as to meet its related lease or ownership obligations. As of September 30, 1999, the Company's total capitalization was roughly \$10.2 million dollars. The Company's private placement of approximately \$79 million of equity securities in October and November, 1999, and its recent successful offering of 11,500,000 shares of common stock for net cash proceeds of approximately \$179 million, have further enhanced the Company's capitalization and liquidity. *See* Prospectus at pp. 17-19.

B. Managerial Capability

Resumes of executive officers, key employees and directors are included in the Prospectus at pages 52 through 56.

C. Technical Capability

Resumes of officers and key employees with relevant telecommunications experience are included in the Prospectus at pages 52 through 55. A description of the Company's customer service and technical support services is included at page 45.