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COMMISSION CLERK

August 18, 2009

**VIA OVERNIGHT DELIVERY**

Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, Florida 32399-0850

090413 -TI

Re: Rosebud Telephone, LLC – IXC Registration

To whom it may concern:

Enclosed please find one original and two (2) copies of the IXC Registration and Tariff for to provide Long Distance Telecommunications Service within the State of Florida filed on behalf of Rosebud Telephone, LLC.

Please return a stamped copy of the extra copy of this letter in the enclosed self-addressed prepaid envelope.

If you have any questions regarding this matter, please contact me at (512) 708-8700.

Very truly yours,  
*Mark Foster*

Mark Foster

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DOCUMENT NUMBER-DATE

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Company Name Rosebud Telephone, LLC

Florida Secretary of State Registration No. M09000002926

Fictitious Name(s) as filed at Fla. Sec. of State \_\_\_\_\_

Company Mailing Name Rosebud Telephone, LLC

Mailing Address PO Box 597, Rosebud, TX 76570

Web Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Physical Address 501 W. Main Street, Rosebud, TX 76570

Company Liaison Ken Melley

Title Consultant

Phone 210-391-6501

Fax 210-481-7705

E-mail address kmelley@avengertel.com

Consumer Liaison to PSC Mary Ann Mitchell

Title Vice President

Address 501 W. Main Street, Rosebud, TX 76570

Phone 254-583-2700

Fax 254-583-2027

E-mail address maryannmitchell@valornet.com

My company's tariff as required in Section 364.04, Florida Statutes, is enclosed with this form. I understand that my company must notify the Commission of any changes to the above information pursuant to Section 364.02, Florida Statutes. My company will owe Regulatory Assessment Fees for each year or partial year my registration is active pursuant to Section 364.336, Florida Statutes. My company will comply with Section 364.603, Florida Statutes, concerning carrier selection requirements, and Section 364.604, Florida Statutes, concerning billing practices.

Mary Ann Mitchell  
Signature of Company Representative

Mary Ann Mitchell  
Printed/Typed Name of Representative

8-18-2009  
Date

DOCUMENT NUMBER-DATE  
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FPSC-COMMISSION CLERK