DOCKET NO. 20250067-TX
FILED 4/18/2025
DOCUMENT NO. 02997-2025
FPSC - COMMISSION CLERK

| | | REQUEST TO ESTABLE (Please type or print. File or | | | | | | | |
|---|------------------|---|------------------|---------------------|--|--|--|--|--|
| Date: | 4/18/2025 | | | | | | | | |
| 1. From Divi | sion / Staff: | Division Of Economics/Smith | | | | | | | |
| 2. OPR: | Lauren Smith/EC | 0 | | | | | | | |
| 3. OCR: (| GCL | | | | | | | | |
| 4. Suggeste | d Docket Title: | Compliance investigation of local exchange Certificate No. 8948, issued to MasTec Network Solutions, LLC, for apparent second-time violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies. | | | | | | | |
| 5. Program/ | /Module/Submo | dule Assignment: | A18a, A10 | # 4 = | | | | | |
| 6. Suggeste | ed Docket Mailin | ng List | | 1: 02 | | | | | |
| a. Provi | ide NAMES/ACF | RONYMS, if registered company | ☐ Provided as an | Attachment | | | | | |
| Company Code, if applicable: (include address, if different from MCD): Representatives (name and address) | | | | ame and address): | | | | | |
| b. Provide COMPLETE NAME AND ADDRESS for all others (match representatives to comp Company Code, if applicable: (include address, if different from MCD): Representatives (name and address) | | | | | | | | | |
| 7. Check one | e: 🗵 Supp | porting documentation attached | ☐ To be provided | with Recommendation | | | | | |

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 1/30/2025 Local Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

FOR PSC USE ONLY

| OT A TELL | | (C E:I: | Check # | | | | | | |
|--|---|--|-----------------------------|--------------------|------------------------|-----------------|-------------------------|--|--|
| STATUS | | | ng Instructions on Bac | (of Form) | | | 06-03-001 | | |
| Actual Return TY184-24-T-0-F Estimated Return MasTec Network Amended Return 1075, Ioo P. Josek | | | | | \$ | \$ | | | |
| | | | , | | \$ | | 003001 E | | |
| | terrate recuiri | 1975 Joe B Jack | _ | | | | | | |
| DEDIAI |) COVERED: | Murfreesboro, | IN 3/12/ | | \$ | | _ P 06-03-001 004011 | | |
| | 4 TO 12/31/2024 | | | | \$ | \$ 1 | | | |
| 1717202 | 10 12/31/2021 | | | | | | | | |
| | | | | | Postma | rk Date | | | |
| | | | | | | of Preparer _ | | | |
| | | Please Complete Bel | ow If Official Mailing | Address Has Cl | nanged | | | | |
| | (Name of Company) | | (Address) | | (City/Sta | 1e) | (Zip) | | |
| | | | | | OTAL | | | | |
| LINE NO. | | | | | DA GROSS NG REVENUE | | RASTATE VENUE | | |
| 1, | Local Service Revenu | es | | \$ | NG REVENOR | \$ | | | |
| 2. | Network Access Reve | nues | | | | | | | |
| 3. | Long Distance Netwo | rk Services Revenues | | | | | | | |
| 4. | Miscellaneous Revenu | ies | | | | | | | |
| 5. | TOTAL REVENUES | S | | \$ | | \$ | | | |
| 6. | LESS: Amounts Paid | to Other Telecommunic | ations Companies(1) | | | | | | |
| 7. | NET INTRASTATE O | PERATING REVENUE | or Regulatory Assessment | Fee Calculation (L | ine 5 less Line 6) | • | | | |
| 8. | Regulatory Assessment F | ee Due (Multiply Line 7 by | 0.0016. If more than \$600. | enter amount. If I | ess, enter \$600.)(2) | .р | | | |
| 9. | Penalty for Late Paym | ent (see "3. Failure to F | File by Due Date" on bac | ek) | | | | | |
| 10. | Interest for Late Paym | Interest for Late Payment (see "3. Failure to File by Due Date" on back) | | | | | | | |
| 11. | Extension Payment Fe | ee (see "4. Extension " o | n back) | | | | | | |
| 12. | TOTAL AMOUNT I | DUE (Add lines 8 throug | gh 11) | | | \$ | - | | |
| | (2) Regardless of the | ist be intrastate only and gross operating revenued in Section 364.336, I | ue of a company, a mi | | | ent fee of \$6 | 00 shall be | | |
| the above | undersigned owner/office information is a true an | d correct statement. I | am aware that pursuant | to Section 837. | 06. Florida Statutes | whoever known | owingly makes a | | |
| false stat second d | ement in writing with the egree. | intent to mislead a pub | lic servant in the perfor | mance of his of | īcial duty shall be g | guilty of a mis | sdemeanor of the | | |
| | (Signature of Compan | y Official) | | (Title) | | | (Date) | | |
| | | | Telephone Number | () | Fax Nu | mber () | | | |
| (| Preparer of Form - Pleas | se Print Name) | | | | | | | |
| | | | F.E.I. No. | | | | | | |

FLORIDA PUBLIC SERVICE COMMISSION

Instructions For Filing Regulatory Assessment Fee Return (Telecommunications Company)

1. WHEN TO FILE: For companies which owed a total of \$10,000 or more of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return is required twice a year and payment must be filed or postmarked:

On or hefore July 30 for the six-month period January 1 through June 30, <u>and</u> On or before January 30 for the six-month period July 1 through December 31.

For companies which owed a total of less than \$10,000 of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

On or before January 30 for the prior twelve-month period January 1 through December 31.

However, when July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee Return may be filed or postmarked on the next business day, without penalty or interest.

2. **FEES:** Each company shall pay 0.0016 of its gross operating revenues derived from intrastate business, as referenced in Rule 25-4.0161(1). F.A.C. Gross Operating Revenues are defined as the total revenues before expenses. Gross Intrastate Operating Revenues are defined as revenues from calls originating and terminating within Florida. Do not deduct any expenses, taxes, or uncollectibles from these amounts.

On Line 6, deduct any amounts paid to another telecommunications company for the use of any telecommunications network to provide service to its customers. <u>Do not deduct</u> any taxes, federal subscriber line charges, interstate long distance access charges, or amounts paid for nonregulated services such as voice mail, inside wire maintenance, or equipment purchases/rentals. **DEDUCTIONS MUST BE INTRASTATE ONLY AND MUST BE VERIFIABLE.**

3. **FAILURE TO FILE BY DUE DATE:** Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 9). In addition, interest shall be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 10). A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.

When a company fails to timely file a Regulatory Assessment Fee Return, the Commission has the authority to order the company to pay a penalty and/or cancel the company's certificate. The company will have an opportunity to respond to any proposed Commission action.

4. **EXTENSION:** A company, for good cause shown in a written request, may be granted up to a 30-day extension. A request must be made by filing the enclosed *Regulatory Assessment Fee Extension Request* form (PSC/ADM 124), two weeks prior to the filing date. When an extension is granted, a charge shall be added to the amount due (Line 11):

0.75% of the fee to be remitted for an extension of 15 days or less, or 1.5% of the fee for an extension of 16 to 30 days.

In lieu of paying the charges outlined above, a company may file a return and remit payment based upon estimated gross operating revenues by checking the "Estimated Return" space in the top left-hand corner on the reverse side. If such return is filed by the normal due date, the company shall be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period.

- 5. **FEE ADJUSTMENTS:** You will be notified as to the amount and reason for any fee adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission by reason of the adjustment. The company may file a written request for a refund of any overpayments. The request should be directed to Fiscal Services at the below-referenced address.
- 6. MAILING INSTRUCTIONS: Please complete this form, make a copy for your files, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. Make your check payable to the Florida Public Service Commission. If you are unable to use the enclosed envelope, please address your remittance as follows:

Florida Public Service Commission 2540 Shumard Oak Boulevard Tailahassee, FL 32399-0850

ATTENTION: Fiscal Services

ADDITIONAL ASSISTANCE: If you need additional assistance in preparing your Regulatory Assessment Fee Return or regarding telecommunications facilities, please contact the Office of Industry Development & Market Analysis at (850) 413-7160. This office may be contacted at the above-referenced address, directing correspondence to the attention of the office.

COMMISSIONERS:
MIKE LA ROSA, CHAIRMAN
ART GRAHAM
GARY F. CLARK
ANDREW G. FAY
GABRIELLA PASSIDOMO SMITH



OFFICE OF THE GENERAL COUNSEL KEITH C. HETRICK GENERAL COUNSEL (850) 413-6199

Public Service Commission

February 20, 2025

TY184-24-T-0-D MasTec Network Solutions, LLC 1975 Joe B Jackson Pkwy Murfreesboro, TN 37127

Dear Certificate Holder:

The Division of Administrative Services has forwarded your account to our office to address the nonpayment of the Regulatory Assessment Fees (RAFs) required by Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code (F.A.C), for the year 2024, which was due January 30, 2025. The RAF return form was mailed to you on December 15, 2024, and to date, Commission records reflect that payment has not been received.

Utilities are charged with knowledge of our rules and statutes. According to Florida Law, you are required to add interest charges at 12% per annum, and a 5% penalty for each 30-day period or fraction thereof, beyond the due date, up to a maximum of 25% in addition to the delinquent amount due. In addition, pursuant to Section 364.285, Florida Statutes, the Commission is authorized to impose upon any entity subject to its jurisdiction a penalty of not more than \$25,000 for each offense, if such entity is found to have refused to comply with or to have willfully violated any lawful rule or order of the Commission, or any provision of Chapter 364.

If payment is not postmarked within 15 calendar days of receipt of this notice, as evidenced by the certified mail receipt, Rule 25-4.0161, F.A.C., automatically imposes a penalty of \$500, \$1,000, or \$2,000, in addition to the interest and penalty listed in the preceding paragraph. The penalty is based on the number of prior dockets against a company for violation of the RAF rule. For one prior docket, it automatically will be assessed a \$1,000 penalty and for two, a \$2,000 penalty. For a third docket, staff will submit a recommendation to the Commission seeking cancellation of the company's certificate and removal from the register.

If you wish to request another form, please contact Lauren Smith at the number below. The payment should be identified with the company code and the company's name. Failure to provide payment within 15 days of this notice will result in the establishment of a docket to address your failure to return the RAFs form and pay RAFs in accordance with Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code. As specified above, pursuant to Section 364.285, Florida Statutes, the Commission may impose a fine for failure to comply. Therefore, it is important that you address this matter now. If you have paid your fees, please provide us with your check number and the date that it was paid.

Should you have any questions concerning this letter please contact Lauren Smith at (850) 413-6906 or via Internet e-mail at LaSmith@psc.state.fl.us.

Sincerely,

Keith C. Hetrick General Counsel

cc: Fiscal Services Section

| Utility Mailing Name: MasTec Network Solutions, LLC | | Cor | Complete Name: MasTec Network Solutions, LLC | | | | Utility Code: | TY184 | Docket | Consumer | | |
|---|--------------------|------------------|--|-------------------|-------------------|----------------|------------------------|----------------|------------------|---------------|----------------------------|------------------|
| Street1: 806 S. Douglas Road, 11th Floor | | | | Street2: | | | | City: | Coral Gables | | | |
| | State: FL | | | | Zipc | 33134 | | | Phone: | (615) 653-980 | 65 | |
| F | ederal ld: 26-30 | 78035 Cer | tificate #: 8948 | Bankrupt | cy Start Date: | | | Bank | ruptcy End Date: | | BType: | |
| Utility Sta | atus Code: REGU | LATED | | Utilit | y Status Date: | 6/4/2020 | | | WriteOff Type: | | | |
| RAF Acc | ount Informatio | n | | | | | | | All Comment | <u> </u> | | |
| | | | /2024 > 🗏 🦻 | ٦ . | | | | | Interest | and Penal | | by nightly |
| | | 1/1/2024 - 12/31 | | Corre | spondence Susp | | Show Cau | | - | | 25 12:01:00 ty adjusted | AM by nightly |
| RAF | Period Covered: | | /2024 | | | On Paymen | t Plan Utility Req | uest Close | | | 25 12:01:01 | AM by nightly |
| | Service: | CLX | | ☐ Confi | dential | Raf Form W | ith drawn Audited | | | | 025 12:01:0 | |
| Curi | rent RAF Status: I | nterest & Penalt | y updated by nightly | job Send | Collection Coll | ection Date: | Collection V | /ithdrawn | | | | |
| Raf Transactions: | | | ✓ RAF | RAF Form Received | | | | ents: | s: | | | |
| Ope | rating Revenue: | 0.00 | and the second second | Ame | nded Return | ☐ Don't calcul | ate Penalty Don't calc | ulate interest | | | | |
| ross Inte | rstate Revenue: | 3 00 | | RAF | Account Satisfied | 4 | | | | | | |
| | RAF Rate: | 0.0016 | | | 4/20/00 | 25 | | | | | | |
| | | | | RAF Due | Date: 1/30/20 | 25 | · D | | | | | |
| | | | | | | | | | | | | |
| | ed Assessments | Paid | | WriteOff | Refu | | Expired Refund | Owe | | | | |
| | Due 600.00 | 0.00 | | WireOff | Keru | ing . | Expired Retund | 600.00 | | | | |
| | 90.00 | 0.00 | | | | <u>.</u> | | 90.00 | | _ ==> | > | |
| • | 18.00 | 0.00 | | 1 | | | 1 | 18.00 | | | Documents | |
| | | | | | | | | 10-01 | - | | | |
| | tension 0.00 0.00 | | 1 | | | | 0.00 | | | | | |
| Total 708.00 0.00 | | 11 | | | | 708.00 | | | | | | |

RELATED DOCKETS INFORMATION

Application for certificate to provide local telecommunications service by MasTec Network Solutions, LLC.

2 20200098-TX

Back

03/23/2020 Closed

| | Complete Name: MasTec Network Solutions, LLC Address: 1975 to 8 Jackson Pkwy Murfreesboro TN 37127 USA: 3065, Douglas Road 11th Floor Coral Gables FL 33134 USA Contact Sr. Staff Attorney. Corporate Counsel. Adam Woodard 1615, 653-9865 Adam Woodard@mastec.com Bankruptcy Start Date: Bankruptcy Drop Date: Active: CreatBy: OMENASCO CreatDate: 3/23/2020 2.39:25 PM ModifyBy: DMENASCO ModifyDate: Active: CreatBy: OMENASCO CreatDate: 3/23/2020 2.39:25 PM ModifyBy: DMENASCO ModifyDate: Active: CreatBy: OMENASCO CreatDate: 3/23/2020 2.39:25 PM ModifyBy: DMENASCO ModifyDate: Active: Complete Name: MasTec Network Solutions LLC Address: 1975 to 8 Jackson Pkwy Murfreesboro TN 37127 USA: 3065, Douglas Road 11th Floor Coral Gables FL 33134 USA Contact Sr. Staff Attorney. Corporate Counsel. | |
|-------------------------------|---|-------------------|
| Utility Code: Utility Code To | TY184 Utility Name: MasTec Network Solutions, LLC Activ Utility Code From: Unregulated Operation Date: Corptype Type: Class Type: OMENASCO created at 2020-03-23 14:39:31 DN | e: ✓ |
| Total: 2 | | |
| # DocketNum | Title I I am an | DocDate Status |
| 1 20240076-TX | Compliance investigation of local exchange Certificate No. 8948, issued to MasTec Network Solutions, LLC, for apparent first-time violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies. | 04/19/2024 Closed |