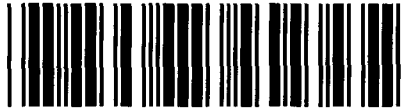




Control Number: 49747



Item Number: 1

Addendum StartPage: 0



49747

151 Southhall Lane, Ste 450
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL 32790-0200
www.inteserra.com

RECEIVED
2019 JUL 16 AM 9:21
PUBLIC UTILITY COMMISSION
FILING CLERK
July 9, 2019
Via Overnight Delivery

Central Records Filing Clerk
Public Utility Commission of Texas
1701 N. Congress Avenue
Austin, TX 78701

RE: Legacy Long Distance International, Inc.
SPCOA Application - Certification Relinquishment
Certificate No. 60976

Dear Sir or Madam:

Enclosed for filing please find the original and three (3) copies of the above referenced filing submitted on behalf of Legacy Long Distance International, Inc. The purpose of this filing is to relinquish certification of the Company's local services, ONLY, issued in Docket No. 34142 on June 20, 2007.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose.

Any questions you may have regarding this filing should be directed to my attention at 407-740-3004 or via email to nfernandez@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

Nelson Fernandez
Consultant

cc: Rafael Quinto (Via Email) - Legacy
tms: TXI1900

Enclosures
NF/sw



Public Utility Commission of Texas

INSTRUCTIONS FOR THE APPLICATION OR AMENDMENT OF A SERVICE PROVIDER CERTIFICATE OF OPERATING AUTHORITY OR A CERTIFICATE OF OPERATING AUTHORITY

A **sworn** application should be submitted to: Central Records Filing Clerk
Public Utility Commission of Texas
1701 N. Congress Avenue
P.O. Box 13326
Austin, Texas 78711-3326
(512) 936-7180

An Application consists of a title page, an affidavit, and the required, properly completed questions. The Applicant shall also file the Application electronically as directed by the Commission's Procedural Rules, which can be found on the Commission's web site. **Seven copies (an original and six copies) of the Application** should be submitted and should meet the following requirements:

- The original copy shall not be hole punched, tabbed, bound or stapled.
- Each of the six copies should be three-hole punched with a tab before each numbered question and response.
- The docket/project number (if known) should appear on the Title Page and the Applicant's name and a page number should appear on each page of the Application.

All responses to questions shall be in a truthful manner. The Applicant must promptly amend the SPCOA or the COA when substantive changes occur by filing **seven copies (an original and six copies) of the amendment** with Central Records in the established docket.

If the Application information is not subject to disclosure under Government Code §552.001 *et seq.*, the Applicant may label that information confidential and file it in accordance with Procedural Rule §22.71(d); citing the applicable provisions of the Government Code. If you have any questions concerning the filing of confidential information, contact Central Records (512) 936-7180.

This Application is a multipurpose application. The Applicant may file for multiple amendments within the same application. **All Questions listed in the "Update Responses as Necessary" column must be responded to with either updated detailed information or "NO CHANGE"**. In your Application, delete all application questions **not listed as necessary for in one of the two columns below. (See Chart below).**

This Application is a format, not a form, so add or drop spaces and lines as needed. Attachments must be labeled. Please keep attachments to a minimum, providing the responses directly below the question as much as possible. Failure to provide a complete, truthful, or responsive answer to any question may result in a denial or a delay in the processing of the Application. Do not file these instructions with this Application.

Application Type	Required Responses	Update Responses as Necessary
New SPCOA Application	Title Page (TP), Affidavit (AF) 1-17	
New COA Application	TP, AF, 1-10, & 12-17	
Re-Qualification SPCOA Application	TP, AF, 1-17	
Re-Qualification COA Application	TP, AF, 1-10, & 12-17	
Name Change Amendment	TP, AF, 1, 2(a, b, c, e, h, i), 3, & 13	2(d, f, g)
Certification Relinquishment	TP, AF, 1, 2(a, b, c, e, h, i), 3, 13, & 18-21	
Change in Ownership / Control	TP, AF, 1, 2(a, b, c, e, f, g, h, i), 13, 14, 16, & 17	2(d) & 3-12, & 15
Change in Ownership between Two Existing SPCOA/COA Holders	TP, AF, 1, 2(a, b, c, e, h, i), 3, & 13	TP, AF, 1 - 17 as Directed
Change in Service Area	TP, AF, 1, 2(a, b, c, e, h, i), 7, 13, 14, 16, & 17	2(d, f, g), 3-6, & 8-12, & 15
Service Discontinuation	TP, AF, 1, 2(a, b, c, e, h, i), 3, 13, & 18	
Change in Type of Provider	TP, AF, 1, 2(a, b, c, e, f, g, h, i), 4-6, 13, 14, 16, & 17	3 & 7-12, & 15
Corporate Restructuring	TP, AF, 1, 2(a, b, c, e, f, g, h, i), 13, 14, 16, 17	2(d), & 3-12, & 15



Public Utility Commission of Texas

1701 N. Congress Avenue
P. O. Box 13326
Austin, Texas 78711-3326
512 / 936-7000 • (Fax) 936-7003
Web Site: www.puc.state.tx.us

TITLE PAGE

APPLICATION FOR CERTIFICATION, RE-QUALIFICATION, OR AMENDMENT TO A SERVICE PROVIDER CERTIFICATE OF OPERATING AUTHORITY OR A CERTIFICATE OF OPERATING AUTHORITY

DOCKET/PROJECT NO. 34142

APPLICANT(s): 1. Legacy Inmate Communications
2. _____

Authorized Representative for this Application:

NAME: Sharon Warren

TITLE: Consultant, Inteserra Consulting Group

ADDRESS: 151 Southhall Lane, Suite 450, Maitland, FL 32751

TELEPHONE: 407-740-3005

FAX: 407-740-0613

EMAIL ADDRESS: swarren@inteserra.com

Regulatory Representative:

NAME: Rafael Quinto

TITLE: Director, Billing, and Regulatory Operations

ADDRESS: 10833 Valley View Street, Suite 150, Cypress, CA 90630

TELEPHONE: 800-577-5334

FAX: 800-700-1116

EMAIL ADDRESS: rquinto@legacyinmate.com

Complaint Representative:

NAME: Rafael Quinto

TITLE: Director, Billing, and Regulatory Operations

ADDRESS: 10833 Valley View Street, Suite 150, Cypress, CA 90630

TELEPHONE: 800-577-5334

FAX: 800-700-1116

EMAIL ADDRESS: rquinto@legacyinmate.com

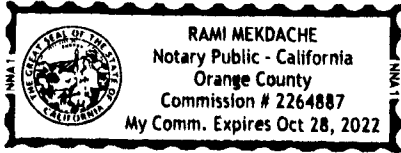
AFFIDAVIT

STATE OF CALIFORNIA §
 §
COUNTY OF Orange §

1. My name is Brian Hill. I am the Chief Executive Officer of Legacy Inmate Communications.

2. I swear or affirm that I have personal knowledge of the facts stated in this Application for a Service Provider Certificate of Operating Authority, that I am competent to testify to them, and that I have the authority to make this Application on behalf of the Applicant. I further swear or affirm that all of the statements and representations made in this Application for a Service Provider Certificate of Operating Authority are true and correct. I swear or affirm that the Applicant understands and will comply with all requirements of law applicable to a Service Provider Certificate of Operating Authority.

Brian Hill
Signature

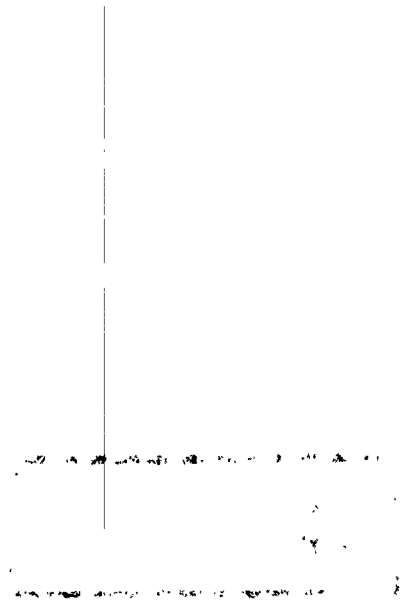


Brian Hill, Chief Executive Officer
Typed or Printed Name

SWORN TO AND SUBSCRIBED before me on the 26 day of JUNE, 2019.

[Signature]
Notary Public In and For the
State of CALIFORNIA

My commission expires: 10/28/22



1. Check only one of the following Requests:

- (a)
- | | |
|--|---|
| <input type="checkbox"/> New SPCOA Application | <input checked="" type="checkbox"/> Application Amending SPCOA No. <u>34142</u> |
| <input type="checkbox"/> New COA Application | <input type="checkbox"/> Application Amending COA No. _____ |

(b) If you are filing an amendment, check one or more of the following as requests made in this amendment filing:

- | | |
|--|--|
| <input type="checkbox"/> Name Change Amendment | <input checked="" type="checkbox"/> Certification Relinquishment |
| <input type="checkbox"/> Change in Ownership/Control | <input type="checkbox"/> Service Discontinuation |
| <input type="checkbox"/> Change in Service Area | <input type="checkbox"/> Change in Type of Provider |
| <input type="checkbox"/> Corporate Restructuring | <input type="checkbox"/> Other |

(c) Provide a summary explanation of all items checked in "b" above.

Legacy Inmate Communications seeks to relinquish their CLEC local service ONLY, while simultaneously seeks to retain their existing Payphone Authority, and long distance service within the state of Texas.

2. Provide a description of the Applicant, which shall include the following:

- (a) Legal name and all assumed names under which the Applicant conducts business, if any;

Legacy Long Distance International, Inc., Legacy Inmate Communications

- (b) Address of principal office and business office;

**10833 Valley View Street, Suite 150
Cypress, CA 90630**

- (c) Principal office/business office telephone number: **800-577-5534**

Fax number: **800-700-1116**

Website address: **<https://www.legacyinmate.com/>**

E-mail address: **RQuinto@legacyinmate.com**

Toll-free customer service telephone number. *(If the Applicant has not obtained the toll-free customer service telephone number at the time of the Application, the Applicant must commit to obtaining one before beginning business);*

800-577-5534

- (e) Form of business in Texas (e.g., corporation, partnership, sole proprietorship), Charter/Authorization number, date business was formed and date change was made (if applicable). Provide the State and date in which the parent company is registered. *(The Commission requires registration with the Secretary of State for all forms of business, except sole proprietorships.)*

Foreign Corporation

800825634

California, 09/17/1996

- (h) Legal name of parent company, if any, and a description of its primary business interests; and,

Jail Education Solutions, Inc. d/b/a Edovo provides communication services, educational and vocational programming, and re-entry preparation by proxy of technology and digital solutions for inmates and their families.

- (i) Legal name of all affiliated companies that are public utilities or that are providing telecommunications services and the states in which they are providing service. Give a description of all affiliates and explain in detail the relationship between the Applicant and its affiliates. An organizational chart should be provided, if available.

Legacy Inmate Communications is not affiliated with any public utilities or telecommunications providers.

3. State the name **and only one name**, in which the Applicant wants the Commission to issue its certificate. Provide the following information from the Applicants registration with the Office of the Secretary of State of Texas or registration with another state or county, as applicable: *(NOTE: If the Applicant is a corporation, the Commission will issue the certificate in either the Applicant's corporate or assumed name, not both. The certificate holder must use only the name approved by the Commission on all bills and advertisements sent to or viewed by the public. Name Changes require Commission Approval as well as Secretary of State Approval.)*
- (a) Requested name: **Legacy Inmate Communications**
 - (b) Assumed names: **Legacy Inmate Communications**
 - (c) Texas Secretary of State (or County) file number: **800825634**
 - (d) Texas Comptroller's Tax Identification number: **17704382682**
 - (e) Other Applicable certification/file numbers:
 - (f) Date the business was registered: **06/05/2007**

13. (a) Any complaint history, disciplinary record and compliance record during the 60 months immediately preceding the filing of the application regarding: the applicant; the applicant's affiliates that provide utility-like services such as telecommunications, electric, gas, water, or cable service; the applicant's principals; and any person that merged with any of the preceding persons. The information should include, but not be limited to, the type of complaint, in which state or federal agency the complaint was made, the status of the complaint, the resolution of the complaint and the number of customers in each state where complaints occurred.

Please see Attachment A.

- (b) Is the Applicant, or the applicant's principals currently under investigation or have the Applicant or its principals been penalized by an attorney general or any state or federal regulatory agency for the violation of any deceptive trade or consumer protection law or regulation? If yes, please explain.

No.

- (b) Disclose whether any owners, directors, officers, or partners in the organization are convicted felons? Also disclose whether the applicant or applicant's principals have been convicted or found liable for fraud, theft, larceny, deceit, or violations of any securities laws, customer protection laws, or deceptive trade laws in any state. If yes, please explain.

No.

- (c) Provide the number of customers per state (including Texas) for the past 60 months, for which the Applicant, its parent company, and/or any affiliates are providing telecommunications services.

Please see Attachment B.

18. If you are relinquishing your certificate or discontinuing service, provide a copy of the customer notification (minimum of 61 days notice) sent to each customer indicating the intent of the Applicant to discontinue service. Notice shall, at a minimum, contain the following information:

Please see Attachment C.

- (a) The approximate date the Applicant intends to discontinue service(s) or operations.

June 30, 2019

- (b) A description of any arrangements that will be made by the Applicant to transfer customers to a carrier of their choice and how, if no choice is made by the customer, the Applicant will transfer the customer to a carrier of last resort.

Customers are directed to contact the Company at 1-877-553-4440 to discuss options for an alternative service provider. An alternative provider assisting in the transition is Fusion (formally known as Birch Communications), and contact information for them is included in the Customer Notification.

- (c) A description of how and when deposits and credits will be returned to customers. And a statement that deposits and credits shall be returned to customers within 60 days of the notification to relinquish certification, or within 30 days of the notification of service(s) discontinuation.
- (d) A statement that any switchover fees shall be paid by the Applicant for customers to be transferred to the carrier of their choice.

Please see Attachment D.

19. If you are relinquishing your certificate, provide a statement that the Applicant shall notify the Texas Comptroller's Office, Texas Secretary of State, and the administrator of the Texas Universal Service Fund of its Application within 5 days of filing the Application.

Please see Attachment E.

20. If you are relinquishing your certificate or discontinuing service, provide a statement that the Applicant shall return deposits and credits to the customers.

Please see Attachment F.

21. If you are relinquishing your certificate, provide a statement that the Applicant shall void all interconnection agreements upon Commission approval of an Application to relinquish certification.

Please see Attachment G.

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment A

Complaint History By State

Legacy Long Distance International, Inc. has never received a complaint regarding CLEC Services.

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment B

Legacy is requesting Confidential Treatment for its List of Customers by State,
which is provided currently under seal.

*Please handle this attachment in accordance with Commission established
procedures for confidential material.*

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment C

Relinquishing Local Authority

Please see the copy of the Customer Notification dated May 20, 2019 of the discontinuation of services scheduled on or after June 30, 2019.



10833 Valley View Street Suite 150, Cypress, CA 90630

May 20, 2019

Customer Name
Customer Address
City, State Zip

URGENT: Your telephone services will be impacted unless you take action!

Dear Valued Customer,

Legacy Long Distance International, Inc. (DBA Legacy Inmate Communications) will discontinue offering local exchange (dialtone) services in the states of California and Texas on or after June 30, 2019, pending applicable regulatory approvals. **Your service will be affected by this discontinuance.**

To avoid a **permanent disruption of your telephone services**, please contact Legacy Inmate Communications at 1-877-553-4440 as soon as possible to discuss your available options for an alternative service provider. Failure to do so may result in insufficient time to transition your services to an alternative provider. If you subscribe to our local services, you could lose your dialtone, including your telephone number, with no short-term ability to restore them. Therefore, you will need to migrate the services you now receive from Legacy Inmate Communications to an alternative provider **before June 30, 2019.**

Additionally, to assist in this transition we have reached out to Fusion (formally known as Birch Communications) as an alternative provider to meet your dialtone needs. Their contact information is:

Fusion
Scott Lee – Senior Account Manager
210 Interstate North Parkway, Suite 300, Atlanta, GA 30339
678-370-2438

A filing is being made with the FCC for approval of this discontinuance of service. The FCC will normally authorize this proposed discontinuance of service unless it is shown that customers would be unable to receive service or a reasonable substitute from another carrier or that the public convenience and necessity is otherwise adversely affected. If you wish to object, you should file your comments as soon as possible, but no later than 15 days after the Commission releases public notice of the proposed discontinuance. You may file your comments electronically through the FCC's Electronic Comment Filing System using the docket number established in the Commission's public notice for this proceeding, or you may address them to the Federal Communications Commission, Wireline Competition Bureau, Competition Policy Division, Washington, DC 20554, and include in your comments a reference to the §63.71 Application of Legacy Long Distance International, Inc. (DBA Legacy Inmate Communications). Comments should include specific information about the impact of this proposed discontinuance upon you or your company, including any inability to acquire reasonable substitute service.

Although we will no longer provide CLEC services, we greatly appreciate your past business with us.

Legacy Inmate Communications' Customer Service can be reached at 1-877-553-4440 or info@legacyinmate.com or in writing at 10833 Valley View Street Suite 150, Cypress, CA 90630.

Sincerely,
Legacy Long Distance International, Inc. (DBA Legacy Inmate Communications)

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment D

Statement on Switchover Fees

Legacy Long Distance International, Inc. shall be responsible to pay for any switchover fees for customers to be transferred to the carrier of their choice.

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment E

Statement to Notify State Offices of Filing



151 Southhall Lane, Ste 450
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL 32790-0200
www.inteserra.com

July 9, 2019
Via Mail

Texas Secretary of State
P.O. Box 12887
Austin, TX 78711-2887

RE: Legacy Long Distance International, Inc.
SPCOA Application - Certification Relinquishment

Dear Sir or Madam:

Please consider this notification that the SPCOA Application - Certification Relinquishment has been filed on behalf of Legacy Long Distance International, Inc.

Any questions you may have regarding this filing should be directed to my attention at 407-740-3004 or via email to nfernandez@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

Nelson Fernandez
Consultant

cc: Rafael Quinto (Via Email) - Legacy
tms: TXI1900

Enclosures
NF/sw



151 Southhall Lane, Ste 450
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL 32790-0200
www.inteserra.com

July 9, 2019
Via Mail

TUSF Administrator
Public Utility Commission of Texas
P.O. Box 13326
Austin, TX 78711-3326

RE: Legacy Long Distance International, Inc.
SPCOA Application - Certification Relinquishment

Dear Sir or Madam:

Please consider this notification that the SPCOA Application - Certification Relinquishment has been filed on behalf of Legacy Long Distance International, Inc.

Any questions you may have regarding this filing should be directed to my attention at 407-740-3004 or via email to nfernandez@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

Nelson Fernandez
Consultant

cc: Rafael Quinto (Via Email) - Legacy
tms: TXI1900

Enclosures
NF/sw



151 Southhall Lane, Ste 450
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL 32790-0200
www.inteserra.com

July 9, 2019
Via Mail

Texas Comptroller of Public Accounts
P.O. Box 13528, Capitol Station
Austin, TX 78711-3528

RE: Legacy Long Distance International, Inc.
SPCOA Application - Certification Relinquishment

Dear Sir or Madam:

Please consider this notification that the SPCOA Application - Certification Relinquishment has been filed on behalf of Legacy Long Distance International, Inc.

Any questions you may have regarding this filing should be directed to my attention at 407-740-3004 or via email to nfernandez@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

Nelson Fernandez
Consultant

cc: Rafael Quinto (Via Email) - Legacy
tms: TXI1900

Enclosures
NF/sw

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment F

Statement to Customers to Return Deposits and Credits

Legacy Long Distance International, Inc. does not provide local service, therefore discontinuance of service, arrangements of transfers, handling of deposits and credits, or any statements directed towards local customers is not applicable.

LEGACY LONG DISTANCE INTERNATIONAL, INC.

Attachment G

Statement to Void All Interconnection Agreements

Legacy Long Distance International, Inc. shall void all local interconnection agreements upon Commission approval of an Application to relinquish certification of local Authority.