

212 East Park Ave., Suite 522, Long Beach, NY 11561

Tel. 1.212.226.4420 Fax 1.212.812.6405

May 10, 2023

Nancy Dippell Secretary/Chief Regulatory Law Judge Missouri Public Service Commission 200 Madison Street, PO Box 360 Jefferson City, MO 65102-0360

Re: In The Matter of the Application of Barr Tell USA, LLC t to Provide Telecommunications Services

Dear Mrs. Dippell:

Pursuant to the Revised Statutes of Missouri Section §392.611.4 and/or Section §392.550, please find the Application of Barr Tell USA, LLC attached, Barr Tell seeks an Authorization for a Certificate of Service Authority to Provide Telecommunications Service(s) to the businesses in the State of Missouri

Please let me know if anything else is needed. I shall look forward to hearing back from you.

Respectfully Submitted,

Harold Barr, President

Tel: 516 708-0111

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MISSOURI

| In The Matter of the Application of |) |
|--------------------------------------|--------|
| BARR TELL USA, LLC |)) |
| to Provide Telecommunications and/or | · |
| Interconnected Voice over Internet |) |
| Protocol Services |) |

APPLICATION

| Applicant's Legal Name, including d/b/a, if applicable "Applicant" Barr Tell USA, LLC | • | Barr Tell USA, LLC |
|--|---|--------------------|
|--|---|--------------------|

Pursuant to §392.611.4 and/or §392.550 RSMo, Applicant seeks the following authorizations as checked below:

| | Certificate of Service Authority to Provide Basic Local Telecommunications Service |
|---|---|
| X | Telecommunications Service |
| | Certificate of Service Authority to Provide Non-Switched Local Telecommunications Service |
| X | Local Telecommunications Service |
| | Certificate of Service Authority to Provide Interexchange Telecommunications Service |
| ^ | Telecommunications Service |
| | Registration to Provide Interconnected Voice over Internet |
| | Protocol Service |

Listed below is basic information regarding the Applicant:

| Type of Organization | Limited Liability Company |
|------------------------------|--|
| Jurisdiction Where Organized | Missouri Domestic LLC |
| Mailing Address | 218 East Park Ave, Suite 522 Long Beach, NY 11561 |
| Electronic Mail Address | hb@barrtell.com |
| Telephone Number | 212 226-4420 |

The company's services will be identified in a tariff or website as indicated below:

| Tariff | www.barrtell.com |
|----------|--|
| Website. | . The website address is (insert web address). |

Attached is an affidavit signed by an officer or general partner of the Applicant stating the various requirements identified in §392.611.4 and/or §392.550 RSMo, plus confirmation the Applicant's service meets the criteria for these services as defined by §386.020 and a copy of Applicant's Certificate of Registration from the Missouri Secretary of State's Office. If applicable, a copy of the registration of the fictitious name with the secretary of state is also attached.

WHEREFORE, the Applicant requests the Commission to issue an order granting the Applicant a registration to offer and provide the indicated services identified in this application.

Respectfully submitted,

Harold Barr, President 218 East Park Ave., Suite 522 Long Beach, NY 11561-3521

Tel: 212 226-4420 E Mail: hb@barrtell.com

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing document was delivered by first class mail, electronic mail or hand delivery, on this $\underline{^{10\text{th}}}$ day of $\underline{\text{May}}$, 20 $\underline{23}$, to the following parties:

General Counsel Missouri Public Service Commission PO Box 360 Jefferson City, MO 65102 Office of Public Counsel PO Box 7800 Jefferson City, MO 65102

AFFIDAVIT

| l, | Harold Barr | , a natural person, do |
|-----------------|-------------------------------------|-------------------------------------|
| hereby swea | r and affirm that I am an officer o | or general partner of Applicant and |
| that the follow | wing information and statements | are true and correct to the best of |
| my knowledg | je and belief: | |

(1) Applicant's basic information:

| Legal Name, Including d/b/a, if Applicable | Barr Tell USA, LLC |
|--|---|
| Principal Place of Business | 218 East Park Ave., #522, Long Beach, NY 11561-3521 |
| Principal Executive Officers | Harold Barr, President |

(2) Area where the Applicant proposes to offer telecommunications or IVoIP services:

| Identify | area | by | local | telephone | |
|----------|---------|------|----------|---------------|-----------|
| company | / excha | nge, | in whole | e or in part: | Statewide |

- (3) That the Applicant is legally, financially, and technically qualified to provide the requested authorization to provide the indicated telecommunications and/or interconnected voice over internet protocol services;
- (4) That the Applicant is ready, willing, able, and will comply with all applicable state and federal laws and regulations imposed upon providers of the indicated telecommunications and/or interconnected voice over Internet protocol services;
- (5) That the Applicant will comply with applicable assessment requirements. These assessments include but are not necessarily limited to:

- (a) Relay Missouri assessment requirements identified in 20 CSR 4240-28.012(2)(C);
- (b) Missouri universal service fund assessment requirements identified in 20 CSR 4240-28.012(2)(B);
- (c) Missouri Public Service Commission assessment requirements identified in 20 CSR 4240-28.012(2)(A);
 - (d) Local enhanced 911;
 - (e) Any applicable license tax;
- (6) That the Applicant will comply with applicable reporting requirements identified in 20 CSR 4240-28.012 including maintaining an updated list of company contacts in the Missouri Commission's Electronic Filing and Information System;
- (7) That the Applicant has established a process for handling inquiries from customers concerning billing issues, service issues, and other consumerrelated complaints;

and

- (8) The Applicant's service meets the criteria as defined within §386.020 for the indicated services sought for certification and/or registration.
- (9) The undersigned requests waiver of Rule 4.017 for good cause. By signing this form, I hereby certify that neither I, nor any other members of this filing party, has had communications with a Commissioner, Commissioner Advisor, Regulatory Law Judge, or any member of their support team in the one hundred fifty (150) days prior to the filing date of this application regarding any substantive issue included in this filing.

This concludes my affidavit.

| | Jacol D Signature |
|---|---------------------------|
| | l Harold Barr |
| | Printed Name President |
| | (Title) |
| State of New York County of Nassau Subscribed and sworn before me | |
| | Note Date: |
| Notary Seal: Notary Seal: Notary Public, State or No. 01SA6404: Quiffed in Nassau Commission Expires Febr | t New York |
| | |



State of Missouri

John R. Ashcroft, Secretary of State Corporations Division PO Box 778 / 600 W. Main St., Rm. 322 Jefferson City, MO 65102 LC014461419
Date Filed: 5/4/2023
John R. Ashcroft
Missouri Secretary of State

Articles of Organization

(Submit with filing fee of \$105.00)

| 1. The name of the BARR TELL USA | | |
|----------------------------------|---|---|
| | (Must include "Limited Liability Company," "Limited Company | y," "LC," "L.C.," "L.L.C.," or "LLC") |
| 2. The purpose(s) for | or which the limited liability company is organized: | |
| Telecommunication | n Services | |
| REGISTERED | Idress of the limited liability company's registered agent i | |
| AGENTS INC. Name | 117 South Lexington Street Ste 100 Street Address: May not use PO Box unless street address also | Harrisonville, MO 64701 so provided City/State/Zip |
| 4. The management | t of the limited liability company is vested in: \Box m | nanagers members (check one) |
| continue, which | y, on which the limited liability company is to dissolve or may be any number or perpetual: <u>Perpetual</u> answer to this question could cause possible tax consequences, you may | |
| | street address(es) of each organizer (PO box may only be used (Organizer(s) are not required to be member(s | s), manager(s) or owner(s) |
| Name Barr, Harold | Address 218 E Park Ave Suite 522 | City/State/Zip Long Beach NY 11561- 3521 |
| | | |
| | | |
| | | |
| operating agreen | OPTIONAL) Pursuant to Section 347.186, the limited liab nent. The names of the series must include the full name of | |
| New Series: ☐ The limited li | iability company gives notice that the series has limited lia | lability. |
| New Series: ☐ The limited li | iability company gives notice that the series has limited lia | iability. |
| New Series: ☐ The limited li | iability company gives notice that the series has limited lia | iability. |
| (Each separate se | eries must also file an Attachment Form LLC 1A.) | |
| | | |
| Name and addres | s to return filed document: | |
| Name: Harole | d Barr | |
| Address: Email | l: halbarr@gmail.com | |
| City State and Z | in Code: | |

| 8. Principal Office Address (Of | PHONAL) of the limited liability company (PO Box i | nay only be used in addition to a physical street |
|---|---|---|
| address): | | |
| 218 E Park Ave Suite 522 | | Long Beach, NY 11561-3521 |
| Address (PO Box may o | nly be used in conjunction with a physical street address) | City/State/Zip |
| | | |
| 9. The effective date of this document indicated: : | cument is the date it is filed by the Secretary of State o | f Missouri unless a future date is otherwise |
| | (Date may not be more than 90 days after the filing date in | this office) |
| In Affirmation thereof, the facts of (The undersigned understands that fa | stated above are true and correct: lse statements made in this filing are subject to the penalties | provided under Section 575.040, RSMo) |
| All organizers must sign: | | • |
| | | |
| Harold Barr | HAROLD BARR | 05/04/2023 |
| Organizer Signature | Printed Name | Date of Signature |
| | | |

STATE OF MISSOURY

John R. Ashcroft Secretary of State

CERTIFICATE OF ORGANIZATION

WHEREAS,

BARR TELL USA, LLC LC014461419

filed its Articles of Organization with this office on the 4th day of May, 2023, and that filing was found to conform to the Missouri Limited Liability Company Act.

NOW, THEREFORE, I, John R. Ashcroft, Secretary of State of the State of Missouri, do by virtue of the authority vested in me by law, do certify and declare that on the 4th day of May, 2023, the above entity is a Limited Liability Company, organized in this state and entitled to any rights granted to Limited Liability Companies.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 4th day of May, 2023.

Secretary of State