

**BEFORE THE PUBLIC SERVICE COMMISSION
OF THE STATE OF MISSOURI**

In The Matter of the Application of)
FULTON COMMUNICATIONS, INC.)
 dba **VERTICAL COMMUNICATIONS** to) Case No. _____
 Provide Telecommunications and/or)
 Interconnected Voice over Internet)
 Protocol Services)

APPLICATION

Applicant's Legal Name "Applicant"	FULTON COMMUNICATIONS, INC. dba VERTICAL COMMUNICATIONS
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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
	Certificate of Service Authority to Provide Non-Switched Local Telecommunications Service
	Certificate of Service Authority to Provide Interexchange Telecommunications Service
X	Registration to Provide Interconnected Voice over Internet Protocol Service

Listed below is basic information regarding the Applicant:

Type of Organization	Corporation doing business under fictitious name. Missouri registration attached as Ex. A.
Jurisdiction Where Organized	Georgia
Mailing Address	1000 Holcomb Woods Parkway, Bldg. 300, Suite 300, Roswell, GA 30076
Electronic Mail Address	PBailey@vertical.com

Telephone Number	770-446-3100
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The company's services will be identified in a tariff or website as indicated below:

Tariff
Website. http://www.vertical.com/vertical/public

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.

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,

/s/ Mark W. Comley
Mark W. Comley #28847
NEWMAN, COMLEY & RUTH P.C.
601 Monroe Street, Suite 301
P.O. Box 537
Jefferson City, MO 65102
(573) 634-2266
(573) 636-3306 FAX

Attorneys for Fulton Communications, Inc.

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing document was sent via e-mail on this 17th day of September, 2018, to General Counsel's Office at staffcounsel@psc.mo.gov; and Office of Public Counsel at opcservice@ded.mo.gov.

/s/ Mark W. Comley

AFFIDAVIT

I, Peter Bailey, a natural person, do hereby swear and affirm that I am an officer or general partner of Applicant and that the following information and statements are true and correct to the best of my knowledge and belief:

(1) Applicant's basic information:

Legal Name	FULTON COMMUNICATIONS, INC. dba VERTICAL COMMUNICATIONS
Principal Place of Business	1000 Holcomb Woods Parkway, Bldg. 300, Suite 300, Roswell, GA 30076
Principal Executive Officers	Peter Bailey/CEO

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

Identify area by local telephone company exchange, in whole or in part:	Statewide
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(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 4 CSR 240-28.050(3);

(b) Missouri universal service fund assessment requirements identified in 4 CSR 240-28.050(2);

(c) Missouri Public Service Commission assessment requirements identified in 4 CSR 240-28.050(1);

(d) Local enhanced 911;

(e) Any applicable license tax;

(6) That the Applicant will comply with applicable reporting requirements identified in 4 CSR 240-28.040 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 consumer-related 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.

This concludes my affidavit.


Peter Bailey

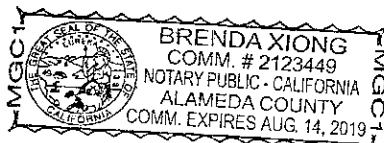
CEO
President (Title)

State of California
County of San Mateo

Subscribed and sworn before me this 13th day of September, 2018.


Notary Public

Notary Seal:





State of Missouri

John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

X001308194
Date Filed: 12/22/2017
Expiration Date: 12/22/2022
John R. Ashcroft
Missouri Secretary of State

Registration of Fictitious Name

(Submit with filing fee of \$7.00)
(Must be typed or printed)

This information is for the use of the public and gives no protection to the name being registered. There is no provision in this Chapter to keep another person or business entity from adopting and using the same name. The fictitious name registration expires 5 years from the filing date. (Chapter 417, RSMo)

Please check one box:

☒ New Registration ☐ Renewal ☒ Amendment ☐ Correction
Charter number Charter number Charter number

The undersigned is doing business under the following name and at the following address:

Business name to be registered: Vertical Communications

Business Address: 1000 Holcomb Woods Parkway, Bldg. 300, Suite 300,

(PO Box may only be used in addition to a physical street address)

City, State and Zip Code: Roswell, GA 30076

Owner Information:

If a business entity is an owner, indicate business name and percentage owned. If all parties are jointly and severally liable, percentage of ownership need not be listed. Please attach a separate page for more than three owners. The parties having an interest in the business, and the percentage they own are:

Name of Owners, Individual or Business Entity	Charter # Required If Business Entity	Street and Number	City and State	Zip Code	If Listed, Percentage of Ownership Must Equal 100%
Fulton Communications, Inc. -		1000 Holcomb Woods Parkway, Bldg. 300, Suite 300,	Roswell, GA	30076	100%

All owners must affirm by signing below

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties of a false declaration under Section 575.060 RSMo)

[Signature] Peter Bailey - CEO 6/30/17
Owner's Signature or Authorized Signature of Business Entity Printed Name Date

Owner's Signature or Authorized Signature of Business Entity Printed Name Date

Owner's Signature or Authorized Signature of Business Entity Printed Name Date

Name and address to return filed document:

Name: _____

Address: _____

City, State, and Zip Code: _____

ORI-12262017-0080 State of Missouri

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Fictitious Name Registration

Exhibit A