

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

In The Matter of the Application of)	
)	
Professional Satellite Services, Inc.)	Case No.
d/b/a Yakabit)	
to Provide Telecommunications and/or)	
Interconnected Voice over Internet)	
Protocol Services)	

APPLICATION

Applicant's Legal Name, including d/b/a, if applicable "Applicant"	Professional Satellite Services, Inc. d/b/a Yakabit
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Pursuant to §392.611.4 and/or §392.550 RSMo, Applicant seeks the following authorizations as checked below:

<input type="checkbox"/>	Certificate of Service Authority to Provide Basic Local Telecommunications Service
<input type="checkbox"/>	Certificate of Service Authority to Provide Non-Switched Local Telecommunications Service
<input type="checkbox"/>	Certificate of Service Authority to Provide Interexchange Telecommunications Service
<input checked="" type="checkbox"/>	Registration to Provide Interconnected Voice over Internet Protocol Service

Listed below is basic information regarding the Applicant:

Type of Organization	Corporation
Jurisdiction Where Organized	Arkansas
Mailing Address	PO Box 111 Berryville, AR 72616
Electronic Mail Address	randall.fowler@hbeinternet.com hbesales@outlook.com
Telephone Number	870-423-6223

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

	Tariff
	Website. The website address is (www.yakabit.com).

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,

ELLINGER BELL LLC

/s/ Stephanie S. Bell

Marc H. Ellinger, #40828
Stephanie S. Bell, #61855
308 East High Street, Suite 300
Jefferson City, MO 65101
Telephone: (573) 750-4100
Facsimile: (314) 334-0450
E-mail: mellinger@ellingerlaw.com
E-mail: sbell@ellingerlaw.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 14th day of November 2023, to the following parties:

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

Office of Public Counsel
PO Box 2230
Jefferson City, MO 65102

AFFIDAVIT

I, Randall B Fowler, 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, Including d/b/a, if Applicable	Professional Satellite Services, Inc. d/b/a Yakabit
Principal Place of Business	306 Eureka Ave., Berryville, AR 72616
Principal Executive Officers	Randall Fowler, President & 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 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 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.

(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.

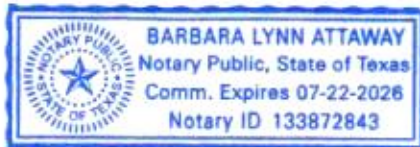
This concludes my affidavit.

Randall B Fowler
Signature
RANDALL B FOWLER
Printed Name
OWNER/CEO
(Title)

State of Texas
County of Rusk
Subscribed and sworn before me this 9 day of November, 2023

Barbara Lynn Attaway
Notary Public

Notary Seal:



STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CERTIFICATE OF AUTHORITY

WHEREAS,

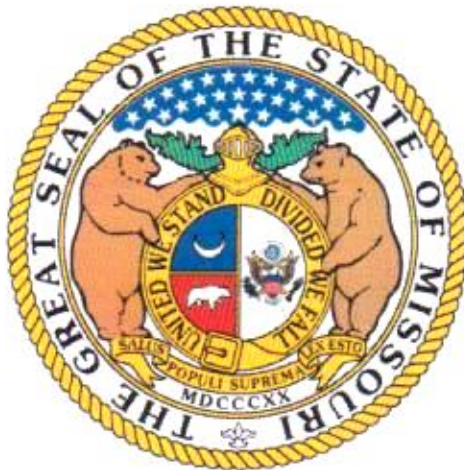
PROFESSIONAL SATELLITE SERVICES, INC.
F001429320

has complied with the Missouri General and Business Corporation Law which governs Foreign Corporations; by filing in the office of the Secretary of the State of Missouri authenticated evidence of its incorporation and good standing under the Laws of the State of Arkansas.

NOW, THEREFORE, I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that said corporation is from this date duly authorized to transact business in this State, and is entitled to all rights and privileges granted to Foreign Corporations under the General and Business Corporation Law.

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 5th day of October, 2023.


Secretary of State



STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

PROFESSIONAL SATELLITE SERVICES, INC.

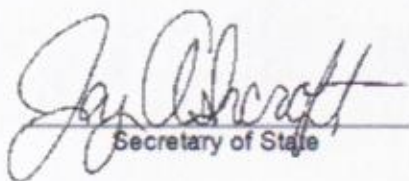
using in Missouri the name

PROFESSIONAL SATELLITE SERVICES, INC.

F001429320

a ARKANSAS entity was created under the laws of this State on the 5th day of October, 2023, and is Good Standing, having fully complied with all requirements of this office.

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 10th day of October, 2023.


Secretary of State



Certification Number: CERT-10102023-0111



State of Missouri

John R. Ashcroft, Secretary of State

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

X001781192

Date Filed: 10/10/2023
Expiration Date: 10/10/2028
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: YAKABIT

Business Address: 306 Eureka Ave PO Box 111

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

City, State and Zip Code: Berryville, AR 72616-3834

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%
PROFESSIONAL SATELLITE SERVICES, INC.	F001429320	117 S Lexington St STE 100	Harrisonville, MO	64701 - 2444	100.00

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)

PROFESSIONAL SATELLITE SERVICES, INC. -
Randall B Fowler

PROFESSIONAL SATELLITE SERVICES,
INC. - RANDALL B FOWLER

10/10/2023

Owner's Signature or Authorized Signature of Business Entity

Printed Name

Date

Name and address to return filed document:

Name: HBE Internet

Address: Email: hbcsales@outlook.com

City, State, and Zip Code: _____