

## AFFIDAVIT

I, Nathan Whittacre, a natural person, do hereby swear or affirm that I am an officer or general partner of Stimulus Technologies of Missouri, LLC dba Stimulus Technologies (“Applicant”), and that the following information and statements are true and correct to the best of my knowledge and belief:

*(1) Applicant’s Legal Name and Principal Place of Business:*

Stimulus Technologies of Missouri, LLC dba Stimulus Technologies  
P.O. Box 50563  
Henderson, Nevada (NV) 89016

314 Lafayette St  
Jefferson City, MO 65101

*Applicant’s Principal Executive Officers:*

Nathan Whittacre, Chief Executive Officer

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

(3) The Applicant is legally, financially, and technically qualified to provide the indicated telecommunications and/or Interconnected Voice over Internet Protocol services.

(4) 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) 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.

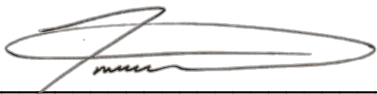
(6) The Applicant will comply with all of the applicable reporting requirements identified in 20 CSR 4240-28.012, including maintaining an updated list of company contacts in the Missouri Commission's Electronic Filing and Information System (EFIS).

(7) The Applicant has established a process for handling inquiries from customers concerning billing issues, service issues and other consumer-related complaints.

(8) The Applicant's service meets the criteria as defined within Section 386.020, RSMo, 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 member of this filing party, has had communications with a Commissioner, Commission 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.

Under penalty of perjury, I declare that the foregoing is true and correct to the best of my knowledge and belief. This concludes my affidavit.

(Signature)  \_\_\_\_\_  
Nathan Whittacre, Chief Executive Officer

Dated: April 24, 2026