151 Southhall Lane, Ste. 450
Maitland, FL 32751
www.inteserra.com

January 2, 2024
Via E-File & Overnight Delivery

Ms. Sallie Tanner, Executive Secretary
Georgia Public Service Commission
244 Washington Street S.W.
Atlanta, GA 30334-9052

RE: Impact Telecom, LLC
Application for Certificate of Authority to Resell Interexchange Telecommunications Services

Dear Ms. Tanner:

Enclosed for filing please find the original and two (2) copies of the Application for Certificate of Authority to Resell Interexchange Telecommunications Services submitted on behalf of Impact Telecom, LLC ("Company").

Also enclosed is an original and one (1) copy of the Confidential/Trade Secret Financials along with an Affidavit. This information, which is provided pursuant to the rules of the Georgia Public Service Commission, is competitively sensitive and not intended for public disclosure. For the foregoing reasons, the Company states that the enclosed information is trade secret and therefore requests confidential treatment and, specifically, that it not be disclosed to any party other than Georgia Public Service Commissioners and staff members with a need to evaluate this information.

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 470-672-3934 or via email to croesel@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

/s/ Carey Roesel

Carey Roesel
Consultant

cc: Alex Valencia (Via E-Mail) - Lingo
tms: GAi2300
Enclosures
CR/sp

BEFORE THE GEORGIA PUBLIC SERVICE COMMISSION

IN RE Application for Certificate of Authority to Resell Interexchange Telecommunications Services	))))	Docket No. _____

AFFIDAVIT

STATE OF Michigan	)
	)
COUNTY OF Macomb	)

Personally came and appeared before me, the undersigned Notary, the within named Alex Valencia and makes this his statement and Affidavit upon oath and affirmation of belief and personal knowledge that the following matters, fact and things set forth below are true and correct to the best of his knowledge.

Impact Telecom, LLC files herewith its Financial Statements in compliance with Georgia Public Service Commission Utility Rule 515-3-1-.11. Said filing includes Company operational and financial data which the Company designates as trade secret and protected information as those terms are defined and used in O.C.G.A. § 10-1-761(4).

The information derives economic value to the Company and to the Company's customers from not being generally known to others. Impact Telecom, LLC submits that the data are highly confidential and competitively sensitive. Accordingly, consistent with the Company's own interests, and the interests of its customers, the Company protects against disclosure of this information.

Pursuant to the terms of Commission Rule 515-3-1-.11, Impact Telecom, LLC is providing information under protective seal (each page is marked "Trade Secret"). In addition to the original marked as "Trade Secret" Impact Telecom, LLC is providing a public disclosure version of the filing with trade secret information redacted.

Alex Valencia, Chief Compliance Officer
Impact Telecom, LLC

SWORN TO and subscribed before me, the undersigned Notary Public,
the 28th day of December, 2023.

My Commission expires on: May 18, 2028

Amanda Jones
Notary Public

AMANDA JONES
Notary Public, State of Michigan
County of Macomb
My Commission Expires May 18, 2028
Acting in the County of Macomb

Georgia Public Service Commission
244 WASHINGTON STREET, SW
ATLANTA GEORGIA 30334-5701

APPLICATION FOR CERTIFICATE OF AUTHORITY
TO RESELL INTEREXCHANGE TELECOMMUNICATIONS SERVICES

I. APPLICANT ADDRESS

NAME OF COMPANY **Impact Telecom, LLC**

ADDRESS: STREET **25925 Telegraph Road, Suite 210**

CITY **Southfield** STATE **MI** ZIP CODE **48033**

TEL. NO. (**972**) **910-1900** FAX NO. (**866**) **418-9750**

EMPLOYEE DESIGNATED TO RECEIVE AND RESPOND TO COMMISSION REQUESTS:

NAME **Alex Valencia** TEL. NO. (**972**) **910-1900**

TITLE **Chief Compliance Officer** FAX NO. (**866**) **418-9750**

E-MAIL **alex.valencia@lingo.com**

EMPLOYEE ADDRESS (*IF DIFFERENT FROM ABOVE*):

STREET _____

CITY _____ STATE _____ ZIP CODE _____

NOTE: FAILURE TO NOTIFY THE COMMISSION, IN WRITING, WHEN THERE IS A CHANGE IN THE CONTACT PERSON OR ADDRESS(ES) LISTED IN THIS APPLICATION WILL RESULT IN CANCELLATION OF THE APPLICATION OR SUBSEQUENT CERTIFICATE.

II. ATTORNEY OR AGENT ADDRESS

IF APPLICANT IS NOT A GEORGIA CORPORATION, GIVE NAME AND ADDRESS OF AN ATTORNEY OR AGENT IN THE STATE OF GEORGIA UPON WHOM PROCESS MAY BE SERVED IN ANY SUIT AGAINST APPLICANT.

NAME _____

NAME OF FIRM **Corporation Service Company**

ADDRESS: STREET **2 Sun Court**

Suite 400

CITY **Peachtree Corner** STATE **GA** ZIP CODE **30092**

TEL. NO. (**800**) **927-9800**.....FAX NO. ( ) _____

III. ORGANIZATION

1. TYPE OF ORGANIZATION: (CHECK ONE)

   [**X**] LLC

   [ ] INDIVIDUAL

   [ ] PARTNERSHIP

   [ ] CORPORATION

   [ ] MUTUAL OR COOPERATIVE (INC./UNINC.)

   [ ] OTHER (SPECIFY): _____

2. IF APPLICANT IS A CORPORATION OR LIMITED PARTNERSHIP, INSERT THE SEVEN-DIGIT CONTROL NUMBER FROM "CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS" ISSUED BY THE SECRETARY OF STATE OF THE STATE OF **GEORGIA.**

   CONTROL NUMBER: **23179454**

   ATTACH A COPY OF GEORGIA SECRETARY OF STATE CERTIFICATE, MARKED EXHIBIT **A**

3. IF APPLICANT IS A CORPORATION, ATTACH COPY OF CHARTER, MARKED EXHIBIT ___. ALSO ATTACH A LIST OF ALL DIRECTORS AND PRINCIPAL STOCKHOLDERS WITH THE NUMBER OF SHARES HELD BY EACH, MARKED EXHIBIT ___, AND GIVE NAME AND ADDRESSES OF THE FOLLOWING OFFICERS:

   PRESIDENT _____ ADDRESS _____

   _____

   V. PRESIDENT _____ ADDRESS _____

   _____

   TREASURER _____ ADDRESS _____

   _____

   SECRETARY _____ ADDRESS _____

   _____

   STATE AND DATE OF INCORPORATION: STATE _____ DATE _____

4. IF APPLICANT IS A PARTNERSHIP OR COOPERATIVE, PROVIDE AN ATTACHMENT, MARKED EXHIBIT , WITH NAMES AND ADDRESSES OF PARTNERS, OFFICERS OR MEMBERS.

5. IF APPLICANT IS A SUBSIDIARY, PARENT, OR AFFILIATE OF ANY OTHER COMPANY, REGARDLESS OF TYPE OR INDUSTRY, PROVIDE A CHART, MARKED EXHIBIT B, SHOWING THE RELATIONSHIPS BETWEEN THE APPLICANT AND ALL AFFILIATED COMPANIES.

IV. EXISTING AUTHORITY

1. DOES THE APPLICANT OR ANY AFFILIATE PRESENTLY HAVE AN EXISTING CERTIFICATE(S) OF AUTHORITY ISSUED BY THE GEORGIA PUBLIC SERVICE COMMISSION?

   [ ] NO

   [**X**] YES

   IF YES, CHECK CERTIFICATE TYPE(S) AND INSERT CERTIFICATE NUMBERS:

   [**X** COMPETITIVE LOCAL EXCHANGE SERVICE (CLEC): **L-0500**

   [**X**] INTEREXCHANGE CARRIER (IXC): X-**R-1086**

   [ ] ALTERNATE OPERATOR SERVICE (AOS): A-____

   [ ] INSTITUTIONAL TELECOMMUNICATIONS SERVICE (ITS): P-____

   [ ] PAYPHONE SERVICE PROVIDER (PSP): ____

   [ ] AUTOMATIC DIALING AND ANNOUNCING DEVICE (ADAD): ____

   [ ] TELEPHONE SERVICE OBSERVING EQUIPMENT (TSOE): ____

2. A) DOES THE APPLICANT OR ANY AFFILIATE PRESENTLY HAVE CERTIFICATE AUTHORITY IN ANY OTHER STATE OR FEDERAL JURISDICTION(S)?

   [ ] NO

   [**X**] YES

   IF YES, LIST STATES IN WHICH AUTHORITY HAS BEEN GRANTED: **Applicant's affiliate, Lingo Telecom, LLC has local and interexchange authority in all 50 states and the District of Columbia.**

   B) DOES THE APPLICANT OR ANY AFFILIATE PRESENTLY HAVE PENDING APPLICATIONS IN ANY OTHER STATE OR FEDERAL JURISDICTION(S)?

   [ ] NO

   [**X**] YES

   IF YES, LIST STATES IN WHICH APPLICATIONS ARE PENDING: **Impact Telecom, LLC has applications pending in California, Connecticut, Kansas, Kentucky, Massachusetts, Minnesota, Nebraska, Nevada, Rhode Island, and South Dakota and is in the process of filing applications or registrations in all remaining jurisdictions.**

   C) HAS THE APPLICANT BEEN <u>DENIED</u> CERTIFICATION IN ANY JURISDICTION?

   [**X**] NO

   [ ] YES

   IF YES, WHICH STATE(S) OR JURISDICTION(S)? _____

   ATTACH A COPY OF THE ORDER(S) DENYING CERTIFICATION.

V. INTEREXCHANGE SERVICE

1. WHAT CUSTOMER CLASS(ES) DOES THE APPLICANT PROPOSE TO SERVE (CHECK ALL THAT APPLY)?

   [ ] RESIDENTIAL

   [ ] BUSINESS

   [**X**] OTHER: **Applicant with provide resold interexchange services to other carriers.**

2. WHAT SERVICES WILL THE APPLICANT PROVIDE (CHECK ALL THAT APPLY)?

   [**X**] MESSAGE TELECOMMUNICATIONS SERVICE (MTS)/ DIRECT DISTANCE DIALING (DDD)

   [ ] WIDE AREA TELECOMMUNICATIONS SERVICE (WATS)

   [ ] PRIVATE LINE

   [ ] CALLING CARD

   [ ] TRAVEL CARD

   [ ] DEBIT OR PRE-PAID CARD (PROVIDE A WORKING DEBIT CARD WITH APPLICATION MATERIALS)

   [ ] TOLL LINE (GENERALLY ONLY APPLIES TO INCUMBENT LOCAL EXCHANGE CARRIERS)

   [ ] OTHER:_____

3. IF PROVIDING TOLL LINE SERVICE, ANSWER THE FOLLOWING:

   (A) EXCHANGES BETWEEN WHICH TOLL LINE OPERATES: _____

   _____

   (B) NAME OF ALL EXCHANGES WHICH RECEIVE INTEREXCHANGE SERVICE THROUGH THIS TOLL LINE:

   _____

   (C) LOCATION OF TOLL STATIONS, IF ANY: _____

   TOTAL LENGTH OF LINE INCLUDING SPURS: _____

   GENERAL ROUTE OF TOLL LINE: _____

4. TARIFFS FOR INTEREXCHANGE SERVICES ARE NO LONGER REQUIRED. DOES THE COMPANY WISH TO MAINTAIN AN INTEREXCHANGE SERVICES TARIFF WITH THE GEORGIA PUBLIC SERVICE COMMISSION?

   [**X**] NO

   [ ] YES

   IF YES, ATTACH AN **INTEREXCHANGE SERVICES TARIFF**, MARKED EXHIBIT ___, WHICH INCLUDES THE RATES, TERMS, AND CONDITIONS FOR ALL SERVICES.

5. AN ACCESS SERVICES TARIFF MUST BE FILED WITH THE GEORGIA PUBLIC SERVICE COMMISSION IN ORDER TO PROVIDE ACCESS SERVICES (SEE O.C.G.A. § 46-5-166(e)). DOES THE COMPANY INTEND TO PROVIDE ACCESS SERVICES?

   [**X**] NO

   [ ] YES

   IF YES, ATTACH AN **ACCESS SERVICES TARIFF**, MARKED EXHIBIT ___, WHICH INCLUDES THE RATES, TERMS, AND CONDITIONS FOR ALL SERVICES.

VI. TECHNICAL CAPABILITY

1. PROVIDE RESUMES AND/OR PROFILES OF THE APPLICANT'S MANAGEMENT TEAM, MARKED EXHIBIT **C.** DESCRIBE EACH TEAM MEMBER'S TECHNICAL QUALIFICATIONS, WHICH INCLUDE ANY RELEVANT WORK EXPERIENCE, EDUCATION, AND TRAINING.

2. DESCRIBE MECHANISM BY WHICH APPLICANT INTENDS TO BILL FOR SERVICES. APPLICANT'S NAME MUST APPEAR ON END-USER'S BILL.

   Applicant will bill for services monthly, unless otherwise specified in the Customer Service Agreement. Applicant's name and contact information will appear on the customer bill.

3. DETAIL THE PROCESSES BY WHICH THE COMPANY PROPOSES TO HANDLE CUSTOMER SERVICE ORDERS, INQUIRIES, AND COMPLAINTS. CUSTOMER SERVICE MUST OPERATE DURING NORMAL BUSINESS HOURS (i.e., 9:00 AM - 5:00 PM, or similar) MONDAY-FRIDAY; DURING NON-BUSINESS HOURS, CUSTOMERS SHOULD BE ABLE TO LEAVE MESSAGES VIA VOICEMAIL OR A MESSAGE SERVICE. DESCRIBE HOW THE APPLICANT WILL COMPLY WITH THIS REQUIREMENT. LIST TELEPHONE NUMBERS THAT WILL BE USED FOR CUSTOMER SERVICE. APPLICANT MUST PROVIDE A TOLL-FREE NUMBER WHEREUPON INQUIRIES AND COMPLAINTS CAN BE SERVED.

   Applicant's customer care department will be open 24 hours per day, 7 days a week to handle any service, billing, or repair complaints. The Applicant's toll-free telephone number for customer inquiries, complaints and repair is 866-557-8920. Customers may contact the Company in writing at the headquarters address indicated below.

   Impact Telecom, LLC
   25925 Telegraph Road, Suite 210
   Southfield, MI 48033
   noc@impacttelecom.com

4. PLEASE STATE WHETHER THE APPLICANT HAS EXPERIENCED CUSTOMER COMPLAINTS LODGED WITH ANY JURISDICTION'S REGULATORY AGENCY OR ATTORNEY GENERAL'S OFFICE FROM ANY NUMBER OF CUSTOMERS REPRESENTING MORE THAN 0.5% OF ALL CUSTOMERS SERVED BY THE APPLICANT WITHIN SUCH JURISDICTION.

   [**X**] NO

   [ ] YES

   IF YES:

   PLEASE STATE THE NAME (INCLUDING CONTACT PERSON) OF EACH REGULATORY AGENCY OR ATTORNEY GENERAL'S OFFICE, DESCRIBE THE NATURE OF THE COMPLAINTS, EXPLAIN WHETHER AND HOW SUCH COMPLAINTS HAVE BEEN RESOLVED, AND STATE YOUR PLANS TO PREVENT SUCH COMPLAINTS FROM OCCURING AGAIN.

   _____

   _____

   _____

   _____

   _____

VII. FINANCIAL CAPABILITY

1. PROVIDE THE MOST RECENT CERTIFIED REPORT ON THE EXAMINATION OF APPLICANT'S FINANCIAL STATEMENTS ALONG WITH BUSINESS PLAN ASSUMPTIONS. IF APPLICANT DOES NOT HAVE CERTIFIED FINANCIAL REPORTS PROVIDE THIS COMMISSION WITH CERTIFIED DOCUMENTATION OF FUNDS TO BE USED FOR CAPITALIZATION.

   The Applicant is providing the consolidated financial statements of its parent, Lingo Management, LLC, which demonstrate that the Applicant has sufficient resources to initiate operations and provide the services for which it seeks authority. See Exhibit D.

2. IS APPLICANT PRESENTLY INVOLVED IN ANY LITIGATION?

   [**X**] NO

   [ ] YES

   IF YES, PLEASE DESCRIBE IN DETAIL: _____

3. DOES THE APPLICANT AGREE TO FILE FINANCIAL REPORTS ON AN ANNUAL BASIS WITH THE COMMISSION AFTER CERTIFICATION IS GRANTED?

   [ ] NO

   [ ] YES

AFFIDAVIT 1 - VERACITY OF APPLICATION AND AGREEMENT TO COMPLY WITH GEORGIA LAWS AND AGENCY RULES/ORDERS

Name: **Alex Valencia**

Company: **Impact Telecom, LLC**

Title/Position: **Chief Compliance Officer and Secretary**

Address: **25925 Telegraph Road, Suite 210**
Southfield, MI 48033

Tel. No. **(972)910-1900**

THE INDIVIDUAL NAMED ABOVE (HEREINAFTER, "APPLICANT") PERSONALLY APPEARED BEFORE THE UNDERSIGNED, AN OFFICER DULY AUTHORIZED TO ADMINISTER OATHS. THE APPLICANT, AFTER FIRST BEING DULY SWORN, DEPOSES AND CERTIFIES THAT HE OR SHE HAS READ THE APPLICATION AND KNOWS THE CONTENTS THEREOF, AND THAT THE STATEMENTS MADE HEREIN ARE TRUE TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF.

APPLICANT FURTHER AGREES TO ABIDE BY ALL APPLICABLE LAWS UNDER THE STATE OF GEORGIA, AS CODIFIED IN THE OFFICIAL CODE OF GEORGIA ANNOTATED; ALL APPLICABLE RULES AND REGULATIONS OF THE GEORGIA PUBLIC SERVICE COMMISSION; AND ALL FINDINGS, CONCLUSIONS, TERMS, AND CONDITIONS SET FORTH IN PERTINENT COMMISSION ORDERS.

UNDER PENALTIES OF PERJURY, APPLICANT DECLARES THAT THE STATEMENTS MADE IN THE FOREGOING APPLICATION, INCLUDING ACCOMPANYING STATEMENTS AND ATTACHMENTS ARE TRUE, COMPLETE, AND CORRECT. I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION IN, OR IN CONNECTION WITH, MY APPLICATION MAY BE CAUSE FOR DENIAL OR LOSS OF CERTIFICATE.



Signature of Affiant

12/28/2023

Date

Subscribed and sworn before me this

28th day of **December**, 20**23**.

Amanda Jones

(NOTARY PUBLIC)

(SEAL)



GPSC FORM 400-1, Revised: 08/17/2015
Electronic Version

AFFIDAVIT 2 – UNIVERSAL ACCESS FUND

The Applicant hereby acknowledges that participation and compliance with the Universal Access Fund (UAF) requirements developed by the Georgia Public Service Commission, as mandated in the Telecommunications and Competition Act of 1995 (O.C.G.A. 46-5-160 and O.C.G.A. 46-5-167), will be complied with.

That Applicant further acknowledges that compliance with the requirements of the UAF is necessary to receive and maintain an active Certificate of Authority to provide telecommunications service in Georgia.

The Applicant also agrees to file quarterly reports for quarters subsequent to the effective date of certification including any portion of the quarter when certificated, in conformance with the instructions attached hereto (see "Addendum – Universal Access Fund") with the full understanding that not to do so may result in revocation of this same certificate. This attested to by signature below of proper authorized company official.

Impact Telecom, LLC
(COMPANY)

(SIGNATURE)

Subscribed and sworn before me this

28th day of **December**, 20**23**.

Amanda Jones
(NOTARY PUBLIC)

(SEAL)

AMANDA JONES
Notary Public, State of Michigan
County of Macomb
My Commission Expires May 18, 2028
Acting in the County of Macomb

AFFIDAVIT 3 – FAMILY VIOLENCE SHELTER CONFIDENTIALITY ACT

Personally appeared before me, an officer duly authorized to administer oaths, **Alex Valencia**, who, after being duly sworn, deposes and says that he is **Chief Compliance Officer** of Applicant, certified telephone service provider or directory information provider.

1.

I make this affidavit on the basis of my personal knowledge.

2.

I have read the May 13, 2005 Order and the August 30, 2005 Amendatory Order in Georgia Public Service Commission ("Commission") Docket No. 19553-U, Implementation of Senate Bill 147, the Family Violence Shelter Confidentiality Act of 2004 (O.C.G.A. § 46-5-7). I have also read the Commission Staff Memorandum dated May 1, 2007 (see "Addendum – Family Violence Shelter Confidentiality Act") that summarizes the requirements under O.C.G.A. § 46-5-7 and the Commission orders issued pursuant to that Code Section of providers of telephone service in the State of Georgia or any other entity that publishes, disseminates, or otherwise provides telephone directory information or listings of telephone subscribers in the State of Georgia.

3.

The Applicant agrees that it will satisfy the minimum requirements set forth in the Commission orders and Staff Memorandum referenced in paragraph 2 of this affidavit to protect the confidentiality of the location and address of family violence shelters in the State of Georgia.

4.

Pursuant to O.C.G.A. § 46-5-7, the Applicant submits this affidavit as its plan to protect the confidentiality of the location and address of family violence shelters in the State of Georgia.

FURTHER AFFIANT SAITH NOT.

Impact Telecom, LLC
(COMPANY)

(SIGNATURE)

Subscribed and sworn before me this

28th day of **December**, 20**23**.

Amanda Jones
(NOTARY PUBLIC)

(SEAL)

AMANDA JONES
Notary Public, State of Michigan
County of Macomb
My Commission Expires May 18, 2028
Acting in the County of Macomb

Impact Telecom, LLC

Exhibit A

Georgia Secretary of State Authority

Control Number : 23179454

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF AUTHORITY

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Impact Telecom, LLC
a **Foreign Limited Liability Company**

has been duly formed under the laws of **Nevada** and has filed an application meeting the requirements of Georgia law to transact business as a **Foreign Limited Liability Company** in this state.

WHEREFORE, by the authority vested in me as Secretary of State, the above **Foreign Limited Liability Company** is hereby granted, on **08/15/2023**, a certificate of authority to transact business in the State of Georgia as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **08/22/2023**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

APPLICATION FOR CERTIFICATE OF AUTHORITY

Electronically Filed
Secretary of State
Filing Date: 8/15/2023 12:17:33 PM

BUSINESS INFORMATION

CONTROL NUMBER	23179454
BUSINESS NAME	Impact Telecom, LLC
BUSINESS TYPE	Foreign Limited Liability Company
EFFECTIVE DATE	08/15/2023
HOME JURISDICTION	Nevada
DURATION	Perpetual
NAME IN HOME STATE	Impact Telecom, LLC
DATE OF FORMATION IN HOME JURISDICTION	05/25/2005
COMMENCEMENT DATE IN GEORGIA	08/15/2023

PRINCIPAL OFFICE ADDRESS

ADDRESS	25925 Telegraph Rd., Suite 210, Southfield, MI, 48033, USA

RECORDS ADDRESS

ADDRESS	25925 Telegraph Rd., Suite 210, Southfield, MI, 48033, USA

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Corporation Service Company	2 Sun Court, Suite 400, Peachtree Corner, GA, 30092, USA	Gwinnett

MANAGER(S)

NAME	TITLE	ADDRESS
Lingo Management, LLC	MANAGER	25925 Telegraph Rd., Suite 210, Southfield, MI, 48033, USA

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Alex Valencia
AUTHORIZER TITLE	Authorized Person

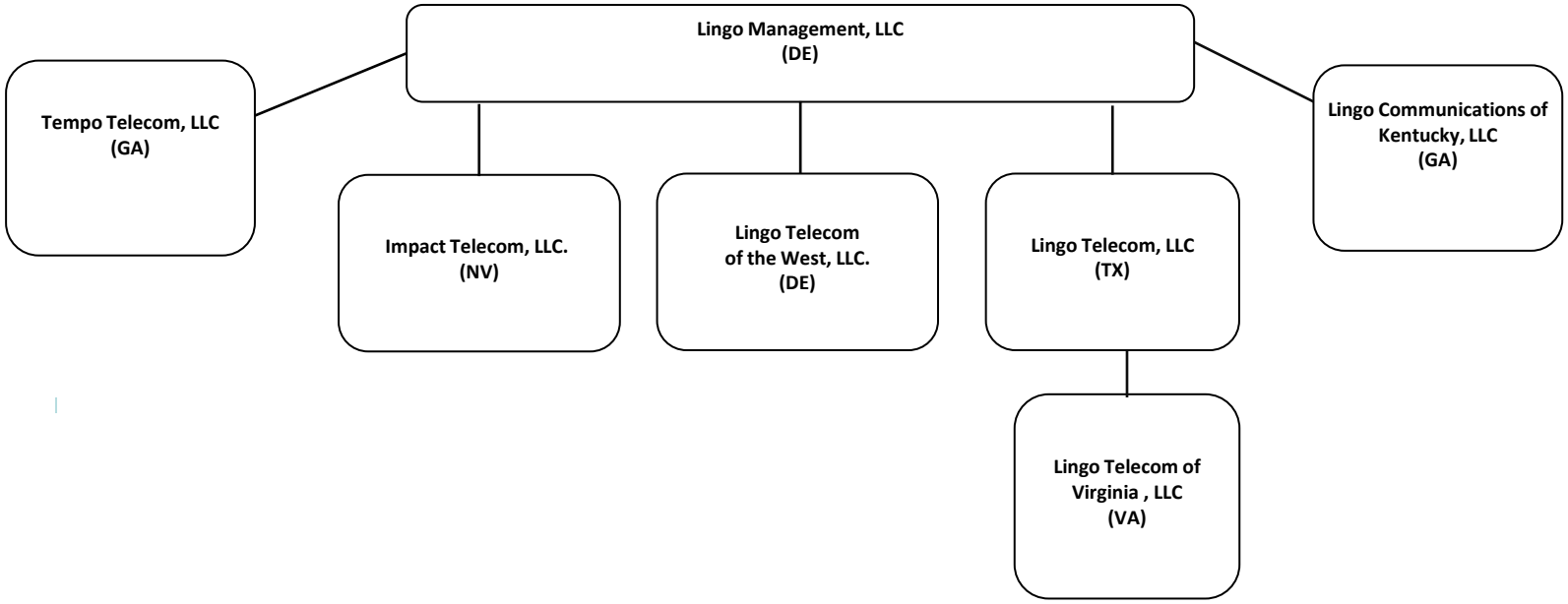
The foreign limited liability company undertakes to keep its records at the address shown above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence.

Impact Telecom, LLC

Exhibit B

Organizational Chart

Lingo Management – Organizational Chart



Impact Telecom, LLC

Exhibit C

Management Resumes

Impact Telecom, LLC
Management Resumes

Ananth Veluppillai, Chief Executive Officer

Ananth Veluppillai serves as Chief Executive Officer in addition to being a member of its Board. Ananth also serves as the Chief Operating Officer of B. Riley Principal Investments (an owner of Impact Telecom). Ananth has over 28 years of experience in telecommunications and held various leadership positions, including serving as the COO of Global Operations for Tech Mahindra's Network Services unit and COO of LCC International, Inc., that provided consulting services in Wireless and Wireline telecommunication networks around the world. Ananth holds B.S. in Electrical Engineering from the University of Maryland at College Park.

Christine Tarrago, Chief Financial Officer

Christine Tarrago is the Chief Financial Officer with more than 25 years of global financial executive leadership. Christine Tarrago has also served among others as CFO of private equity backed organizations. Before that, she had leadership positions at Siemens and Alstom. Originally from Europe, she graduated with a BA and MBA from the University of Augsburg, Germany, started her career in Europe where she worked in public accounting on large international publicly listed companies in Germany, France, and Spain. She is fluent in four languages and is a registered CPA in the State of Illinois.

Vilas Uchil, Chief Operating Officer

Vilas Uchil is the Chief Operating Officer. In this capacity, he is responsible for overseeing innovation, technology, and operations. Prior to joining the team, Vilas worked in the telecommunications industry for 20 years. He was the head of engineering and operations at NovoLink Communications, and held positions at SPRINT-NEXTEL Corporation, General Electric Capital GCF (UK), and TATA-Nortel Technology Lab (India). He received a Bachelor of Engineering in electronics and telecommunication engineering from Bombay University (India), and he holds two Master of Science degrees from Missouri University of Science and Technology (electrical engineering/computer engineering).

Alex Valencia, Chief Compliance Officer

Alex Valencia serves as the Chief Compliance Officer and is a 20+ year veteran of the telecom industry. Alex oversees the Company's government and legal affairs, including corporate governance and directs all regulatory policies. He holds an LLM in International and Comparative Law from Notre Dame Law School, a Juris Doctorate from Gonzaga University School of Law, and Bachelor of Arts degrees in Political Science and Latin America Studies from Southern Methodist University.

Impact Telecom, LLC

Exhibit D

Financials

Financial information is being filed under Seal as Confidential

Public Disclosure Document

Lingo Management, LLC
Income Statement as of December 31, 2022

	12/31/2022 YTD Unaudited

PUBLIC DISCLOSURE DOCUMENT

Lingo Management, LLC
Balance Sheet as of December 31, 2022

	12/31/22

PUBLIC DISCLOSURE DOCUMENT

Lingo Management, LLC
Statement of Cash Flow
For the Period January 1, 2022 to December 31, 2022

	FY22