TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING DATA ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier

I certify that (Name of Agent) National Exchange Carrier Association, Inc. (NECA) **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data provided to the Authorized Agent; and, to the best of my knowledge, the actual data provided to the Authorized Agent are accurate.**

Name of Authorized Agent	National Exchange Carrier Association, Inc. (NECA)	
Name of Reporting Carrier	PlantTel	
Signature of Authorized Officer	Eric Ramey Digitally signed by Eric Ramey Date: 2024.05.31 15:01:36 -04'00'	Date
Printed name of Authorized Officer	Eric Ramey	
Title or position of Authorized Officer	SVP - Regulatory & HR	
Telephone number of Authorized Officer: (___)___-____, ext. _____	803-581-9152	

Study Area Code of Reporting Carrier	220379		Filing Due Date for this form (mm/dd/yyyy)	June 17,2024	

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.