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June 27, 2017

Daniel P. Wolf
Executive Secretary
MN Public Utilities Commission
121 Seventh Place, Suite 350
St. Paul, MN 55101-2147

Re: In the Matter of Tekstar Communications Notice re Adoption of Interconnection
Agreements Pursuant to Section 252(i) of the Act
MPUC Docket No.

Dear Mr. Wolf:

Subject to Commission approval, Tekstar Communications, Inc. hereby notifies the Commission it will adopt the following interconnection agreements pursuant to Section 252 (i) of the Act:

INCUMBENT LEC	CLEC	DOCKET
Frontier Communications of Minnesota, Inc.	Teleport Communications America	14-628
Citizens Telecommunications Co of MN, LLC	Woodstock Telephone Co	11-313

The Commission conditionally granted Tekstar authority to provide local exchange services in the above ILECs' service areas in Docket 16-81.

If you have any questions in this matter please contact me.

Sincerely,

/s/ Thomas G. Burns

Thomas G. Burns
Consultant for Tekstar Communications, Inc.
Attachment



Information Request Form ("IRF")

The following information must be provided and certified as correct by a duly authorized Officer, Consultant or Attorney of the business entity that will be named as the execution party in the Agreement (the "Contracting Party").

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1. Date: **6/27/2017** Type of Agreement Contracting Party is requesting: **Traffic Exchange**
 2. State(s) this IRF pertains to: (AL, AZ, CA, CT, FL, GA, ID, IA, IL, IN, MI, MN, MT, NC, NE, NM, NV, NY, OH, OR, PA, SC, TN, TX, UT, WA, WI, WV)
MN
 3. State(s) listed in #2 in which the Contracting Party has an **existing contract with Frontier**. For each state listed, submission of this IRF (for purposes of a new interconnection agreement) to Frontier confirms the Contracting Party is providing Termination Notice of the existing contract(s).
none
 4. **Exact Legal Entity Name As Certified**, including d/b/a if appropriate, of the Contracting Party that will be legally bound by the document. If this differs by state, provide for each state listed in #2.
Tekstar Communications, Inc.
 5. Contracting Party's affiliate company name(s), or enter "none" if no affiliates: **Arvig Enterprises Inc**
 6. Contracting Party's preferred acronym: **Tekstar**
 7. Contracting Party's Legal Form (e.g., corporation, partnership, etc.): **corporation**
 8. State of Incorporation/LLC/LP: **If this differs by state, please provide for each state listed in #2.**
MN
 9. Contracting Party's principal place of business address:
150 2nd Ave. SW, Perham, MN 56573
 10. Contracting Party's designee to receive **Legal Notice** for the Contracting Party (at least one designee should be a Contracting Party Employee):
Name: **Dave Schornack** Title/Firm: **Director of Business and Sales**
Street Address: **150 2nd Ave. SW, Perham, MN 56573**
Telephone: **(218) 346-8107** Fax: **(218) 346-5510**
Email: **David.Schornack@arvig.com**

11. Contracting Party's duly authorized Officer with **Execution Authority** to bind the Contracting Party:

Name: **Dave Schornack** Title/Firm: **Director of Business and Sales**
Street Address: **150 2nd Ave. SW, Perham, MN 56573**
Telephone: **(218) 346-8107** Fax: **(218) 346-5510**
Email: **David.Schornack@arvig.com**

12. Contracting Party's individual/department to receive legal notice regarding **Tax Matters**:

Name: **Mark Birkholz**
Full Address: **150 2nd Ave. SW, Perham, MN 56573**

13. Contracting Party's authorized individual/department to receive **Usage Data**:

Name: **Mark Birkholz**
Full Address: **150 2nd Ave. SW, Perham, MN 56573**

14. The Contracting Party is a (type of Carrier i.e. CLEC, CMRS): **CLEC**

Facilities-Based Providers and Resellers only, please complete the following three questions:

14a. **For each state listed in #2** where Certification is **Approved**, list the **state(s)**, **certification number(s)** and **certification date(s)**.

Docket No: 16-81.

14b. **For each state listed in #2** where Certification is **Pending**, list the **state(s)** and **date(s)** **certification was filed** with the state regulatory authority.

14c. **For each state listed in #2** where Certification has **Not Been Filed**, list **the state(s)**.
*[Note: Many states require either an approved or pending certification **prior to the filing** of an interconnection agreement.]*

15. Contracting Party's Representative authorized to receive the **Executable Document**.

Name: **Dave Schornack** Title/Firm: **Director of Business and Sales**
Street Address: **150 2nd Ave. SW, Perham, MN 56573**
Telephone: **(218) 346-8107** Fax: **(218) 346-5510**
Email: **David.Schornack@arvig.com**

**All Items
in #15 are
Required**

I, Thomas Burns, as consultant for Tekstar Communications, Inc., the Contracting Party, do hereby certify that the foregoing information is correct. (No Signature Required)