



November 2, 2011  
Via Electronic Filing

Ms. Renee Jenkins, Commission Secretary  
Ohio Public Utilities Commission  
180 East Broad Street  
Columbus, OH 43215

RE: **Case No.: 11-5598-TP-CIO**

In the Matter of the Application of **DeltaCom, Inc.** to Adopt the Trade Name of EarthLink Business

Dear Ms. Jenkins:

Please accept this Application as notification that DeltaCom, Inc. is changing the name under which it provides interexchange telecommunications services within the state of Ohio to DeltaCom, Inc. d/b/a EarthLink Business. Effective with this filing, the Company will continue to provide traditional telecommunications services under the EarthLink Business trade name.

This change is transparent to the customer as it is simply the adoption of a new trade name and will not affect the rates, terms or conditions of services currently provided to the Company's Ohio customers. All customers were notified of the new trade name via a bill message. The Company respectfully requests this filing to become effective on November 3, 2011.

Please acknowledge receipt of this filing by sending a stamped copy of this filing via email to [tforte@tminc.com](mailto:tforte@tminc.com). Questions regarding this filing should be directed to my attention at 407-740-3001 or via email to [tforte@tminc.com](mailto:tforte@tminc.com).

Thank you for your assistance in this matter.

Sincerely,

/s/ Thomas M. Forte

Thomas M. Forte  
Consultant to DeltaCom, Inc.

cc: Mary Whiting (via Email) - EarthLink - Deltacom  
file: EarthLink - Deltacom - Ohio - Other  
tms: OHx1101

Enclosures  
TF/mw

**The Public Utilities Commission of Ohio**  
**TELECOMMUNICATIONS FILING FORM**

(Effective: 01/20/2011)

This form is intended to be used with most types of required filings. It provides check boxes with rule references for the most common types of filings. It does not replace or supersede Commission rules in any way.

**In the Matter of the Application of DeltaCom Inc.  
to Adopt the Trade Name of EarthLink Business**

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)  
)  
)

**TRF Docket No. 90-5725**

**Case No. 11-5598-TP-CIO**

**NOTE: Unless you have reserved a Case #, leave the "Case No" fields  
BLANK.**

Name of Registrant(s) DeltaCom, Inc.

DBA(s) of Registrant(s) \_\_\_\_\_

Address of Registrant(s) 1375 Peachtree Street, Level A, Atlanta, Georgia 30309

Company Web Address www.earthlinkbusiness.com

Regulatory Contact Person(s) Mary Whiting, Director-Regulatory Compliance Phone 616-988-7028 Fax 616-988-0466

Regulatory Contact Person's Email Address mwhiting@corp.earthlink.com

Contact Person for Annual Report Mary Whiting, Director-Regulatory Compliance Phone 616-988-7028

Address (if different from above) 2610 Horizon Drive SE, Suite B, Grand Rapids, Michigan 49546

Consumer Contact Information Customer Support, DeltaCom Phone 800-239-3000

Address (if different from above) P.O. Box 1301, Arab, Alabama 35016

Motion for protective order included with filing? ☐ Yes ☒ No

Motion for waiver(s) filed affecting this case? ☐ Yes ☒ No [Note: Waivers may toll any automatic timeframe.]

**Notes:**

Section I and II are Pursuant to Chapter 4901:1-6 OAC

Section III – Carrier to Carrier is Pursuant to 4901:1-7 OAC, and Wireless is Pursuant to 4901:1-6-24 OAC.

Section IV – Attestation

(1) Indicate the Carrier Type and the reason for submitting this form by checking the boxes below.

(2) For requirements for various applications, see the identified section of Ohio Administrative Code Section 4901 and/or the supplemental application form noted.

(3) Information regarding the number of copies required by the Commission may be obtained from the Commission's web site at [www.puco.ohio.gov](http://www.puco.ohio.gov) under the docketing information system section, by calling the docketing division at 614-466-4095, or by visiting the docketing division at the offices of the Commission.

(4) An Incumbent Local Exchange Carrier (ILEC) offering basic local exchange service (BLES) outside its traditional service area should choose CLEC designation when proposing to offer BLES outside its traditional service area or when proposing to make changes to that service.

**All Filings that result in a change to one or more tariff pages require, at a minimum, the following exhibits.**

Exhibit	Description:
A	The tariff pages subject to the proposed change(s) as they exist before the change(s)
B	The Tariff pages subject to the proposed change(s), reflecting the change, with the change(s) marked in the right margin.
C	A short description of the nature of the change(s), the intent of the change(s), and the customers affected.
D	A copy of the notice provided to customers, along with an affidavit that the notice was provided according to the applicable rule(s).

## Section I – Part I - Common Filings

<b>Carrier Type</b> <input type="checkbox"/> Other (explain below)	<input type="checkbox"/> For Profit ILEC	<input type="checkbox"/> Not For Profit ILEC	<input type="checkbox"/> CLEC
Change terms & conditions of existing BLES	<input type="checkbox"/> ATA <u>1-6-14(H)</u> (Auto 30 days)	<input type="checkbox"/> ATA <u>1-6-14(H)</u> (Auto 30 days)	<input type="checkbox"/> ATA <u>1-6-14(H)</u> (Auto 30 days)
Introduce non-recurring charge, surcharge, or fee to BLES			<input type="checkbox"/> ATA <u>1-6-14(H)</u> (Auto 30 days)
Introduce or Increase Late Payment	<input type="checkbox"/> ATA <u>1-6-14(I)</u> (Auto 30 days)	<input type="checkbox"/> ATA <u>1-6-14(I)</u> (Auto 30 days)	<input type="checkbox"/> ATA <u>1-6-14(I)</u> (Auto 30 days)
Revisions to BLES Cap.	<input type="checkbox"/> ZTA <u>1-6-14(F)</u> (0 day Notice)		
Introduce BLES or expand local service area (calling area)	<input type="checkbox"/> ZTA <u>1-6-14(H)</u> (0 day Notice)	<input type="checkbox"/> ZTA <u>1-6-14(H)</u> (0 day Notice)	<input type="checkbox"/> ZTA <u>1-6-14(H)</u> (0 day Notice)
Notice of no obligation to construct facilities and provide BLES	<input type="checkbox"/> ZTA <u>1-6-27(C)</u> (0 day Notice)	<input type="checkbox"/> ZTA <u>1-6-27(C)</u> (0 day Notice)	
Change BLES Rates	<input type="checkbox"/> TRF <u>1-6-14(F)</u> (0 day Notice)	<input type="checkbox"/> TRF <u>1-6-14(F)(4)</u> (0 day Notice)	<input type="checkbox"/> TRF <u>1-6-14(G)</u> (0 day Notice)
To obtain BLES pricing flexibility	<input type="checkbox"/> BLS <u>1-6-14</u> <u>(C)(1)(c)</u> (Auto 30 days)		
Change in boundary	<input type="checkbox"/> ACB <u>1-6-32</u> (Auto 14 days)	<input type="checkbox"/> ACB <u>1-6-32</u> (Auto 14 days)	
Expand service operation area			<input type="checkbox"/> TRF <u>1-6-08(G)</u> (0 day)
BLES withdrawal			<input type="checkbox"/> ZTA <u>1-6-25(B)</u> (0 day Notice)
<b>Other*</b> (explain) _____			

## Section I – Part II – Customer Notification Offerings Pursuant to Chapter 4901:1-6-7 OAC

Type of Notice	Direct Mail	Bill Insert	Bill Notation	Electronic Mail
<input checked="" type="checkbox"/> 15-day Notice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 30-day Notice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Date Notice Sent:</b>				

## Section I – Part III –IOS Offerings Pursuant to Chapter 4901:1-6-22 OAC

IOS	Introduce New	Tariff Change	Price Change	Withdraw
<input type="checkbox"/> IOS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section II – Part I – Carrier Certification - Pursuant to Chapter 4901:1-6-08, 09 & 10 OAC

Certification	ILEC (Out of Territory)	CLEC	Carrier's Not Offering BLES	CESTC	CETC
* See Supplemental form	<input type="checkbox"/> ACE <u>1-6-08</u> * (Auto 30- day)	<input type="checkbox"/> ACE <u>1-6-08</u> * (Auto 30 day)	<input type="checkbox"/> ACE <u>1-6-08</u> * (Auto 30 day)	<input type="checkbox"/> ACE <u>1-6-10</u> (Auto 30 day)	<input type="checkbox"/> UNC <u>1-6-09</u> * (Non-Auto)

\*Supplemental Certification forms can be found on the Commission Web Page.

## Section II – Part II – Certificate Status & Procedural

Certificate Status	ILEC	CLEC	Carrier's Not Offering BLES
Abandon all Services		<input type="checkbox"/> ABN <u>1-6-26</u> (Auto 30 days)	<input type="checkbox"/> ABN <u>1-6-26</u> (Auto 30 days)
Change of Official Name *	<input type="checkbox"/> ACN <u>1-6-29(B)</u> (Auto 30 days)	<input type="checkbox"/> ACN <u>1-6-29(B)</u> (Auto 30 days)	<input checked="" type="checkbox"/> CIO <u>1-6-29(C)</u> (0 day Notice)
Change in Ownership *	<input type="checkbox"/> ACO <u>1-6-29(E)</u> (Auto 30 days)	<input type="checkbox"/> ACO <u>1-6-29(E)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-29(C)</u> (0 day Notice)
Merger *	<input type="checkbox"/> AMT <u>1-6-29(E)</u> (Auto 30 days)	<input type="checkbox"/> AMT <u>1-6-29(E)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-29(C)</u> (0 day Notice)
Transfer a Certificate *	<input type="checkbox"/> ATC <u>1-6-29(B)</u> (Auto 30 days)	<input type="checkbox"/> ATC <u>1-6-29(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-29(C)</u> (0 day Notice)
Transaction for transfer or lease of property, plant or business *	<input type="checkbox"/> ATR <u>1-6-29(B)</u> (Auto 30 days)	<input type="checkbox"/> ATR <u>1-6-29(B)</u> (Auto 30 days)	<input type="checkbox"/> CIO <u>1-6-29(C)</u> (0 day Notice)

\* Other exhibits may be required under the applicable rule(s). ACN, ACO, AMT, ATC, ATR and CIO applications see the 4901:1-6-29 Filing Requirements on the Commission's Web Page for a complete list of exhibits.

## Section III – Carrier to Carrier (Pursuant to 4901:1-7), and Wireless (Pursuant to 4901:1-6-24)

Carrier to Carrier	ILEC	CLEC
Interconnection agreement, or amendment to an approved agreement	<input type="checkbox"/> NAG <u>1-7-07</u> (Auto 90 day)	<input type="checkbox"/> NAG <u>1-7-07</u> (Auto 90 day)
Request for Arbitration	<input type="checkbox"/> ARB <u>1-7-09</u> (Non-Auto)	<input type="checkbox"/> ARB <u>1-7-09</u> (Non-Auto)
Introduce or change c-t-c service tariffs,	<input type="checkbox"/> ATA <u>1-7-14</u> (Auto 30 day)	<input type="checkbox"/> ATA <u>1-7-14</u> (Auto 30 day)
Request rural carrier exemption, rural carrier suspension or modification	<input type="checkbox"/> UNC <u>1-7-04 or 05</u> (Non-Auto)	
Changes in rates, terms & conditions to Pole Attachment, Conduit Occupancy and Rights- of-Way.	<input type="checkbox"/> UNC <u>1-7-23(B)</u> (Non-Auto)	
<b>Wireless Providers</b> See <u>4901:1-6-24</u>	<input type="checkbox"/> RCC [Registration & Change in Operations]	<input type="checkbox"/> NAG [Interconnection Agreement or

**Section IV. – Attestation**

**Registrant hereby attests to its compliance with pertinent entries and orders issued by the Commission.**

---

**AFFIDAVIT**  
***Compliance with Commission Rules***

I am an agent of the applicant corporation, DeltaCom, Inc. and am authorized to make this statement on its behalf.

Please Check ALL that apply:

☐ I attest that these tariffs comply with all applicable rules for the state of Ohio. I understand that tariff notification filings do not imply Commission approval and that the Commission's rules as modified and clarified from time to time, supersede any contradictory provisions in our tariff. We will fully comply with the rules of the state of Ohio and understand that noncompliance can result in various penalties, including the suspension of our certificate to operate within the state of Ohio.

☒ I attest that customer notices accompanying this filing form were sent to affected customers, as specified in Section II, in accordance with Rule 4901:1-6-7, Ohio Administrative Code.

I declare under penalty of perjury that the foregoing is true and correct.

**Executed on (Date):** November 2, 2011      **at (Location):** Maitland, Florida

/s/Thomas M. Forte  
Consultant to DeltaCom, Inc.  
**\*(Signature and Title)**

November 2, 2011  
**(Date)**

- *This affidavit is required for every tariff-affecting filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

---

**VERIFICATION**

I, Thomas M. Forte verify that I have utilized the Telecommunications Filing Form for most proceedings provided by the Commission and that all of the information submitted here, and all additional information submitted in connection with this case, is true and correct to the best of my knowledge.

/s/Thomas M. Forte  
Consultant to DeltaCom, Inc.  
**\*(Signature and Title)**

November 2, 2011  
**(Date)**

*\*Verification is required for every filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

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***Send your completed Application Form, including all required attachments as well as the required number of copies, to:***

Public Utilities Commission of Ohio  
Attention: Docketing Division  
180 East Broad Street, Columbus, OH 43215-3793

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***Or***

***Make such filing electronically as directed in Case No 06-900-AU-WVR***

#### Section IV. – Attestation

Registrant hereby attests to its compliance with pertinent entries and orders issued by the Commission.

---

#### **AFFIDAVIT**

##### ***Compliance with Commission Rules***

I am an agent of the applicant corporation, DeltaCom, Inc. and am authorized to make this statement on its behalf.

Please Check ALL that apply:

☐ I attest that these tariffs comply with all applicable rules for the state of Ohio. I understand that tariff notification filings do not imply Commission approval and that the Commission's rules as modified and clarified from time to time, supersede any contradictory provisions in our tariff. We will fully comply with the rules of the state of Ohio and understand that noncompliance can result in various penalties, including the suspension of our certificate to operate within the state of Ohio.

☒ I attest that customer notices accompanying this filing form were sent to affected customers, as specified in Section II, in accordance with Rule 4901:1-6-7, Ohio Administrative Code.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on (Date) **November 1, 2011** at (Location) **Maitland, Florida**

/s/Thomas M. Forte

\_\_\_\_\_  
\*(Signature and Title)

**Thomas M. Forte, Consultation to DeltaCom, Inc.**

\_\_\_\_\_  
(Date)

**November 1, 2011**

- *This affidavit is required for every tariff-affecting filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

---

#### **VERIFICATION**

I, Thomas M. Forte verify that I have utilized the Telecommunications Filing Form for most proceedings provided by the Commission and that all of the information submitted here, and all additional information submitted in connection with this case, is true and correct to the best of my knowledge.

/s/Thomas M. Forte

\_\_\_\_\_  
\*(Signature and Title)

**Thomas M. Forte, Consultant to DeltaCom, Inc.**

\_\_\_\_\_  
(Date)

**November 1, 2011**

*\*Verification is required for every filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

---

***Send your completed Application Form, including all required attachments as well as the required number of copies, to:***

**Public Utilities Commission of Ohio  
Attention: Docketing Division  
180 East Broad Street, Columbus, OH 43215-3793  
Or**

***Make such filing electronically as directed in Case No 06-900-AU-WVR***

**DELTACOM, INC.**

**EXHIBIT A**

EXISTING TARIFF PAGES

Not Applicable  
Company is Detariffed

**DELTACOM, INC.**

**EXHIBIT B**

PROPOSED REVISED TARIFF PAGES

Not Applicable  
Company is Detariffed



**DELTACOM, INC.**

**EXHIBIT C**

**DESCRIPTION OF CHANGES AND CUSTOMERS AFFECTED**

This filing is submitted as official notification that the Company is changing the name under which it provides interexchange telecommunications services within the state of Ohio from DeltaCom, Inc. to DeltaCom, Inc. d/b/a EarthLink Business.

This change is transparent to the customer as it is simply the adoption of a new trade name and does not affect the rates, terms or conditions of service provided to the Customer. All customers were notified of the new trade name via a bill message.

**DELTACOM, INC.**

**EXHIBIT D**

CUSTOMER NOTICE

## **CUSTOMER NOTICE**

EarthLink joined forces with Deltacom to create EarthLink Business<sup>™</sup>, one of the nation's largest business-to-business providers of IP services, integrated voice and data communications and equipment solutions. To learn more, visit [earthlinkbusiness.com](http://earthlinkbusiness.com) or contact Customer Care at 1-800-239-3000.

**DELTACOM, INC.**

**EXHIBIT E**

CERTIFICATE OF AUTHORITY  
TRADE NAME

**\*201114400092\***

DATE:	DOCUMENT ID:	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
05/24/2011	201114400092	TRADE NAME/ORIGINAL FILING (RNO)	50.00	.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

UNISEARCH, INC.  
4694 CEMETERY RD  
PMB 217  
HILLIARD, OH 43026

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jon Husted**

**2022735**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**EARTHLINK BUSINESS**

and, that said business records show the filing and recording of:

Document(s)

**TRADE NAME/ORIGINAL FILING**

Date of First Use: 12/08/2010  
Expiration Date: 05/20/2016

Document No(s):

**201114400092**

DELTACOM, INC.  
7037 OLD MADISON PIKE  
HUNTSVILLE, AL 35806



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of  
the Secretary of State at Columbus,  
Ohio this 20th day of May, A.D.  
2011.

A handwritten signature in cursive script that reads "Jon Husted".

Ohio Secretary of State



Form 534A Prescribed by the:  
Ohio Secretary of State

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)

www.sos.state.oh.us  
Busserv@sos.state.oh.us

Expedite this form: (select one)  
Mail form to one of the following:

☐ Expedite PO Box 1390  
Columbus, OH 43216

\*\*\* Requires an additional fee of \$100 \*\*\*

☐ Non Expedite PO Box 670  
Columbus, OH 43216

**NAME REGISTRATION**  
**Filing Fee \$50**

(CHECK ONLY ONE (1) BOX)

<input checked="" type="checkbox"/> Trade Name (167-RNO)  Date of first use: <u>12/8/10</u>	<input type="checkbox"/> Fictitious Name (169-NFO)
--	---

Name being registered or reported:

EarthLink Business

Name of the Registrant:

DELTACOM, INC.

NOTE: If the registrant is a foreign corporation licensed in Ohio under an assumed name, provide the assumed name and the name as registered in its jurisdiction of formation.

The Registrant is a(n): (Check only one (1) box)

- |  |   |
|--|---|
| <input type="checkbox"/> Individual  | <input type="checkbox"/> Unincorporated Association |
| <input type="checkbox"/> Partnership<br>Registration #, if any _____   | <input type="checkbox"/> Professional Association   |
| <input type="checkbox"/> Limited Partnership<br>Registration # _____<br>If foreign, Jurisdiction of Formation _____            | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Limited Liability Partnership<br>Registration # _____<br>If foreign, Jurisdiction of Formation _____  |   |
| <input type="checkbox"/> Limited Liability Company<br>Registration # _____<br>If foreign, Jurisdiction of Formation _____      |   |
| <input type="checkbox"/> Ohio Corporation<br>Charter # _____   |   |
| <input checked="" type="checkbox"/> Foreign Corporation<br>Ohio license # <u>804294</u><br>Jurisdiction of Formation <u>AL</u> |   |

RECEIVED  
SECRETARY OF STATE  
2011 MAY 20 PM 3:27  
CLIENT SERVICES CENTER

**All registrants must complete the information in this section**

Business address:

7037 OLD MADISON PIKE

Mailing Address

HUNTSVILLE

AL

35806

City

State

Zip Code

The general nature of the business conducted by the registrant:

TELECOMMUNICATIONS PRODUCTS AND  
SERVICES

**Complete the information in this section if registrant is a partnership not registered in Ohio**

Provide the name and address of at least one general partner:

Name

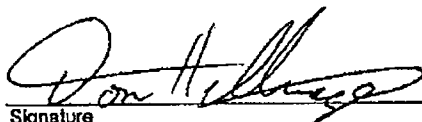
Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

**REQUIRED**

Must be authenticated  
(signed) by the registrant or  
an authorized  
representative



Signature

Date

DON HELLWEGE, Vice President

Print Name

Signature

Date

Print Name



7037 Old Madison Pike, Suite 400  
Huntsville, AL 35806

May 9, 2011

Ohio Secretary of State  
P.O. Box 788  
Columbus, OH 43216

Re: EarthLink Business

Dear Sir or Madam:

The undersigned, Don Hellwege the Vice President, Assistant General Counsel and Secretary of DeltaCom, Inc. hereby consents to the use of the name EarthLink Business for use as a trade name in the state of Ohio.

A handwritten signature in black ink, appearing to read 'Don Hellwege', written over a horizontal line.

Don Hellwege, Vice President, Assistant General Counsel and Secretary



**This foregoing document was electronically filed with the Public Utilities**

**Commission of Ohio Docketing Information System on**

**11/2/2011 1:46:43 PM**

**in**

**Case No(s). 11-5598-TP-CIO**

Summary: Application to Adopt Trade Name electronically filed by Mr. Thomas M Forte on behalf of DeltaCom, Inc.