

AFFIDAVIT

I, Ajay Shenoy, a natural person, do hereby swear or affirm that I am an officer or general partner of **AccessLine Communications Corporation** ("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:*

**AccessLine Communications Corporation
1050 Enterprise Way, Suite 200
Sunnyvale, CA 94089**

Applicant's Principal Executive Officers:

**Michael Gold, CEO/President
Jason Veldhuis, CFO & Secretary
Ajay Shenoy, Vice President/Corporate Controller**

(2) *Area where the Applicant proposes to offer telecommunications or VoIP 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) 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, member of the General Counsel or any member of their support team in the sixty (60) days prior to the filing date of this application regarding any substantive issue included in this filing. If any communication of this sort has occurred in the previous sixty (60) day period, I further certify this application was held until sixty (60) days have passed from the

date of the subject communication, or we have requested a waiver for good cause as allowed by Commission Rule 20 CSR 4240-4.017(1)(D).

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) _____

Ajay Shenoy, Vice President

Dated: _____

March 11, 2025

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Santa Clara

On 11th, March 2025 before me, Tracie Ho (Notary Public)
(insert name and title of the officer)

personally appeared Ajay Shenoy
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature  (Seal)

