

BellSouth

Statement of Assumption of All Outstanding and Future Charges

The undersigned new subscriber does hereby assume and agree to pay to BellSouth Business Systems, Inc. upon demand all future, current, past due and presently outstanding bills and charges which are attributed to or associated with 904-225-0136-001 & 904-m35-0922-001 including such bills and charges as were incurred during the time period the account was in the name of na as well as any and all charges incurred during the time period that the undersigned is a subscriber. This includes directory advertising charges and all non-regulated billing.

It is understood that if this agreement is not returned to BellSouth Business Systems, Inc. by 01-04-08, the service will be disconnected.

Billing name of new subscriber:

Family Support Services

Legal name of new subscriber:

Family Support Services of North Florida, Inc

Printed name of new subscriber:

Family Support Services of North Florida, Inc.

Signature of new subscriber:

by Lee E. Whiston III Date: 12/13/07

Sworn to and subscribed before me, this 13th day of December 2007 (Year)

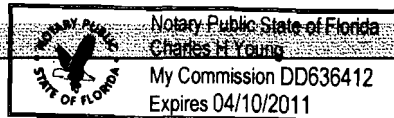
Notary Public signature:

Charles H. Young

Printed name:

CHARLES H. YOUNG

My commission expires:



Date:

***NOTE:** This form becomes void if altered in any way.

Fax to: Susan Comerford
(404) 829-0014

Then mail original
to: BellSouth Business Systems, Inc.

Attn: Susan Comerford
3A27
1025 Lenox Park

Atlanta, GA 30319

Authorization and Release Notice

The undersigned subscriber does hereby agree to transfer subscriber's telephone number(s): **904-225-0136-001 & 904-m35-0922-001**, and thereby relinquish all claims to this number, together with all rights, privileges, benefits, refund rights and credits (excluding deposits) which may accrue or have accrued and are not yet actually furnished to subscriber. BellSouth Business Systems, Inc. is neither required nor obligated to extend service to new customer under the above number, nor bound in any respect, by this document, or by any contract or agreement between subscriber and new customer or any other person.

Payment of any refund or extension of any credits or other rights required by law in connection with the above number must be made by BellSouth Business Systems, Inc. in the manner and to the person required by the applicable tariff or regulatory authority, notwithstanding anything to the

contrary in this document.

It is understood that if this agreement is not returned to BellSouth Business Systems, Inc. by **Date**, the service will be disconnected.

Billing name of former subscriber: Nassau County Board of County Commissioners

Legal name of former subscriber: Nassau County Board of County Commissioners


Printed name of former subscriber: Jim B. Higginbotham, Chairman

Signature of former subscriber:  Date: 1-2-08

Sworn to and subscribed before me, this 2nd day of January 2008.

Notary Public signature: 

Printed name: Lori M. Gamble

My commission expires:  **LORI M. GAMBLE**
Notary Public, State of Florida
My Comm expires Aug. 18, 2009
Comm No DD 462777

NOTE: This form becomes void if altered in any way.

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(404) 829-0014

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to: Attn: Susan Comerford
3A27
1025 Lenox Park
Atlanta, GA 30319

DELTA COM



data > internet > phone systems > local > long distance: hey, that's our job

Customer Care Center 1-800-239-3000

NAME CHANGE REQUEST

Business XXX Residential
Date 11/29/07 Sales Rep. Angela Wilbanks Account Number 1237670-3
REASON FOR CHANGE Transfer of Company

PREVIOUS BILLING INFORMATION

Name Nassau County Board of Commissioners
Billing Address PO Box 4000
City Fernandina Beach State Florida Zip 32035-4000 Telephone ()
Location Address 86004 Christian Way
Yulee, Florida 32097
Contact Name Michelle Begley

The undersigned consents to the requested name change

Signature Date

NEW BILLING INFORMATION

(If new billing information is for a business account, please attach a completed credit application.)

Name Family Support Services of North Florida
Date of Birth Social Security No.
Billing Address 4057 Carmichael Avenue
City Jacksonville State Florida Zip 32259 Telephone (904) 421-5800
Location Address 86004 Christian Way
Yulee, Florida 32097
Contact Name Kathy Showers and Tina Hale

In making this request for name change, the undersigned warrants its authority to request this name change and agrees to all provisions of the ITC/DeltaCom Communications, Inc.'s ("Company") tariff as the same now exists or may be amended in the future, provided that said future amendment is approved by the State Public Service Commission. In connection with this Name Change Request, the undersigned hereby consents to the transfer to the new customer of all known Company provided phone lines. The undersigned does hereby grant the Company the necessary rights, privileges, and easements to operate, replace and maintain, on the property occupied by the undersigned, such equipment as is reasonably necessary for the transmission of the specified telecommunications service(s). All such equipment installed by the Company on said premises shall, at all times, be the sole property of the Company except as otherwise provided by law or the Company tariff and the Company shall have the right of access to said property to repair, service, remove or replace the same. The undersigned does hereby request the Company to furnish service and equipment as above specified and as may be ordered from time to time, either orally or in writing. If the service for which this request for name change is made is "1+" dialing (Equal Access), the undersigned hereby agrees to designate the Company as its primary long distance carrier with the local exchange carrier serving its premises and does hereby agree to notify its local exchange carrier of this change of service. The undersigned agrees to pay all costs of collection, including a reasonable attorney's fee, whether incurred by suit or otherwise, and hereby expressly waives all rights to claim exemption under the Constitution and Laws of the State of Alabama or of any other state as to this debt should this account not be paid when due. Any service cancellation request by the undersigned is not required to be in writing. The undersigned authorizes an investigation release of its credit and employment history and acknowledges that this request shall not become effective unless accepted by the Company within a reasonable time of this notice.

Current Customer Signature [Signature] Title Chairman Date 1-2-08
New Customer Signature [Signature] Title Chief Operating Officer Date 11/29/07
Comments