

April 5, 2018

Federal Communications Commission
Office of the Secretary
Attn: Chief, Pricing Policy Division
Room 5-A225
445 12th Street SW
Washington, DC 20554

**Re: 2018 Annual Certification Section 254(g)- Rate Integration & Deaveraging
Certification CC Docket No. 96-61**

Ms. Dortch:

On behalf of QuantumShift Communications, Inc in accordance with 47 C.F.R. 64.1900 of the Commission's rules, please find the attached certification. This document is being filed in order to certify compliance with the geographic rate averaging and rate integration requirements of Section 254(g) of the Act, pursuant to 47 C.F.R 64.1900 of the Commission's rules.

Should you have any questions regarding this filing, please do not hesitate to contact us.

Respectfully submitted,



Sarai Cortez
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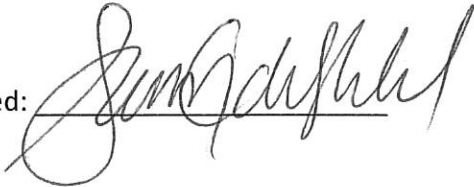
QuantumShift Communications, Inc.
12657 Alcosta Blvd, Suite 418
San Ramon, CA 94583

Certification of Compliance

I, Sameer Hilal, hereby certify that I am an officer of QuantumShift Communications, Inc. and that I am authorized to execute this certification on behalf of QuantumShift Communications, Inc.

Furthermore, I hereby swear under oath that, to the best of my knowledge, information and belief, QuantumShift Communications, Inc complies with the geographic rate averaging and rate integration obligations pursuant to Section 254(g) of the Communications Act of 1934, as amended, in providing detariffed interstate, domestic, and interexchange services.

Signed: _____



Subscribed and sworn to before me this _____ day of _____, 2018.

Notary Public

My Commission Expires: _____

Please see California Jurat document attached.

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- ☐ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

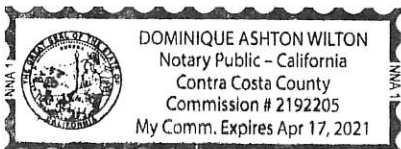
 Signature of Document Signer No. 1

 Signature of Document Signer No. 2 (if any)

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 Contra Costa



Place Notary Seal and/or Stamp Above

Subscribed and sworn to (or affirmed) before me

on this 24 day of April, 2018,
 by Sameer Hilal
 Date Month Year

(1) Sameer Hilal

(and (2) _____),
 Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature Dominique Wilton
 Signature of Notary Public

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

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Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____