

960689-TC

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT

Joseph Mansour

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

Gandy Shell

3. ADDRESS OF THE APPLICANT(S)

STREET 4747 Gandy BLVD

CITY Tampa

STATE & ZIP FLORIDA, 33611

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:   
OWN NAME.

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP:

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME Joseph Mansour Enterprise, Inc.

ADDRESS 4747 Gandy BLVD.

Tampa, FL 33611

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

DOCUMENTATION: Attach proof that fictitious name has been registered with the Florida Secretary of States Office.