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DATE

ATTACHMENT B

**FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION**

- 1. LEGAL NAME OF THE APPLICANT RLM Recreation, Inc.  
D/B/A Sneaky's Sports Bar & Grill
- 2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS RLM Recreation, Inc.  
D/B/A Sneaky's Sports Bar & Grill

3. ADDRESS OF THE APPLICANT(S)  
 STREET 7500 Ulmerton Rd  
 CITY Largo  
 STATE & ZIP CODE FL 33771

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: \_\_\_\_\_

ADDRESS \_\_\_\_\_

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

**D. DOING BUSINESS UNDER A FICTITIOUS NAME** [ ]

**DOCUMENTATION:** Attach proof that a fictitious name(s) has been registered with the Florida Secretary of States Office

**5. PROVIDER NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS**

**NAME:** AT & T

**TITLE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELED PAY TELEPHONE CERTIFICATES.**

NO  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER**

N/A  
\_\_\_\_\_

**8. LIST THE STATES IN WHICH THE APPLICANT**

**A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE**

N/A  
\_\_\_\_\_



# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

10. PLEASE CHECK  THE SERVICES THAT WILL BE PROVIDED

- LOCAL
  - LONG DISTANCE
  - COIN
  - CALLING CARD
  - CREDIT CARD
  - OTHER, DESCRIBE  \_\_\_\_\_
- 

11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR One

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12. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE?

- PERSONALLY
  - FULL-TIME TECHNICIAN
  - PART-TIME TECHNICIAN
  - SERVICE/REPAIR/MAINTENANCE CONTRACT
  - OTHER DESCRIBE
- 
- 
- 

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA IOXXX+0, 950-XXXX, AND 1-800? (See Rule 25-24 515(6). F A C

yes

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and - 4.29.8 OF THE AMERICAN NATIONAL STANDARD SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F ANSI STANDARDS) (See Rule 25-24.515(14), F.A.C.)

*yes*

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**APPLICANT ACKNOWLEDGMENT**

Applicant RLM Recreation Inc. 4614 Emerald Lakes Blvd. # 6011

**I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.**

Signature: 

Title: President

Date: March 13, 1998

**THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.**

I, THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION IS A TRUE AND CORRECT STATEMENT, I AM AWARE THAT PURSUANT TO S 837.06, FLORIDA STATUTE, WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION, ALSO I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50.00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE I AGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.

 President

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: March 13, 1998



**FLORIDA DEPARTMENT OF STATE**  
Sandra B. Mortham  
Secretary of State

December 5, 1997

**CAPITAL CONNECTION, INC.**  
417 E. VIRGINIA ST.  
STE. 1  
TALLAHASSEE, FL 32301

The Articles of Incorporation for RLM RECREATION, INC. were filed on December 5, 1997 and assigned document number P97000102645. Please refer to this number whenever corresponding with this office regarding the above corporation. The certification you requested is enclosed.

**PLEASE NOTE: COMPLIANCE WITH THE FOLLOWING PROCEDURES IS ESSENTIAL TO MAINTAINING YOUR CORPORATE STATUS. FAILURE TO DO SO MAY RESULT IN DISSOLUTION OF YOUR CORPORATION.**

**A CORPORATION ANNUAL REPORT MUST BE FILED WITH THIS OFFICE BETWEEN JANUARY 1 AND MAY 1 OF EACH YEAR BEGINNING WITH THE CALENDAR YEAR FOLLOWING THE YEAR OF THE FILING DATE NOTED ABOVE AND EACH YEAR THEREAFTER. FAILURE TO FILE THE ANNUAL REPORT ON TIME MAY RESULT IN ADMINISTRATIVE DISSOLUTION OF YOUR CORPORATION.**

**A FEDERAL EMPLOYER IDENTIFICATION (FEI) NUMBER MUST BE SHOWN ON THE ANNUAL REPORT FORM PRIOR TO ITS FILING WITH THIS OFFICE. CONTACT THE INTERNAL REVENUE SERVICE TO RECEIVE THE FEI NUMBER IN TIME TO FILE THE ANNUAL REPORT AT 1-800-829-3676 AND REQUEST FORM SS-4.**

**SHOULD YOUR CORPORATE MAILING ADDRESS CHANGE, YOU MUST NOTIFY THIS OFFICE IN WRITING, TO INSURE IMPORTANT MAILINGS SUCH AS THE ANNUAL REPORT NOTICES REACH YOU.**

Should you have any questions regarding corporations, please contact this office at the address given below.

Randall Purinton, Document Specialist  
New Filing Section

Letter Number: 897A00057542



# State of Florida



## Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of RLM RECREATION, INC., a Florida corporation, filed on December 5, 1997, as shown by the records of this office.

The document number of this corporation is P97000102645.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Fifth day of December, 1997



CR2EO22 (2-95)

*Sandra B. Northam*

Sandra B. Northam  
Secretary of State

# ARTICLES OF INCORPORATION

97 DEC -5 PM 1:16

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

## ARTICLE I NAME

The name of the corporation shall be: RLM Recreation, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3127 Shoreline Drive  
Clearwater, Florida 33760

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
5000 Shares

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: RONALD L. McMillan  
3127 Shoreline Drive  
Clearwater, Florida 33760

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:  
RONALD L. McMillan  
3127 Shoreline Drive  
Clearwater, Florida 33760

Ronald L. McMillan President  
Signature/Incorporator

December 7, 1997  
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ronald L. McMillan President  
Signature/Registered Agent

December 7, 1997  
Date

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NOTE

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**RLM RECREATION INC DBA  
 SNEAKY'S SPORTS BAR & GRILL  
 813-534-9000  
 7500 ULMERTON RD.  
 LARGO, FL 33771**

1327

PAY TO THE ORDER OF Florida Public Service Commission

March 13

\$ 100.00

63-612/631 2

One hundred and 00/100

DOLLARS

**Barnett**

204-204  
12625 Balch Road  
Largo, Florida 33771

for pay telephone Application Fee