

DEPOSIT

DATE ATTACHMENT B

D748 APR 04 1998

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT \_\_\_\_\_

TESCOM Int. Comm. Inc.

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS 980490-TC

TESCOM Int. Comm. Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 450 N. Park Rd #707

CITY Hollywood

STATE & ZIP CODE FL 33021

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: Mark Singer

ADDRESS 450 N. Park Rd #707  
Hollywood, FL 33021

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APR 6 10 51 AM '98  
ADMINISTRATION  
MAIL ROOM

# 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: MARK SINGER

TITLE: PRESIDENT

PHONE: 954) 389-3243 / 954-989-1885 / 954-298-1300

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.

\_\_\_\_\_

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE.

NONE

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

NONE

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

NO

D. HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES, EXPLAIN CIRCUMSTANCES.

NO

9. PLEASE INDICATE IF ANY OFFICERS OF THE CORPORATION, PARTNERSHIP OR INDIVIDUAL APPLICANT HAVE BEEN ADJUDGED BANKRUPT, MENTALLY INCOMPETENT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR WHETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.

NO

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

10. PLEASE CHECK  THE SERVICES THAT WILL BE PROVIDED:

LOCAL	<input checked="" type="checkbox"/>
LONG DISTANCE	<input checked="" type="checkbox"/>
COIN	<input type="checkbox"/>
CALLING CARD	<input checked="" type="checkbox"/>
CREDIT CARD	<input checked="" type="checkbox"/>
OTHER, DESCRIBE	<input type="checkbox"/> <u>Coinless</u>

11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 10

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

PERSONALLY	<input type="checkbox"/>
FULL-TIME TECHNICIAN	<input type="checkbox"/>
PART-TIME TECHNICIAN	<input type="checkbox"/>
SERVICE/REPAIR/MAINTENANCE CONTRACT	<input checked="" type="checkbox"/>
OTHER DESCRIBE	<input type="checkbox"/>

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

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.

  
\_\_\_\_\_

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 3/2/78

APPLICANT ACKNOWLEDGMENT

Applicant DARRON McKEE / MARK Singer TESCOM Int Comm Inc.

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

Signature: MS - A Mc

Title: President / V.P

Date: 3/26/18      3/26/18

**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.**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 31, 1998

CORPORATE ACCESS INC.  
1116-D THOMASVILLE ROAD  
MOUNT VERNON SQ.  
TALLAHASSEE, FL 32303

The Articles of Incorporation for TESCOM INTERNATIONAL COMMUNICATIONS INC. were filed on March 31, 1998 and assigned document number P98000029473. 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.

Loria Poole, Corporate Specialist  
New Filings Section

Letter Number: 398A00017067



ARTICLES OF INCORPORATION

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:

TESCOM INTERNATIONAL COMMUNICATIONS INC

98 MAR 31 AM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

450 N. Park Rd #707  
Hollywood, FL 33021

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARK SINGER Pres.  
450 N. PARK RD #707  
Hollywood, FL 33021

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

DARREN MCKEE / MARK SINGER (Pres.)  
450 N. PARK RD #707 Hollywood, FL, 33021

[Signature] [Signature]  
Signature/Incorporator\*

3/19/98  
Date

I also hereby accept designation  
of Registered Agent.

(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

(see above)

Signature/Registered Agent

Date

# State of Florida



## Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of TESCOM INTERNATIONAL COMMUNICATIONS INC., a Florida corporation, filed on March 31, 1998, as shown by the records of this office.

The document number of this corporation is P9800029473.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Thirty-first day of March, 1998



CR2EO22 (2-95)

*Sandra B. Northam*

Sandra B. Northam  
Secretary of State

DEPOSIT

DATE ATTACHMENT B

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

DZ 48 APR 06 1999

1. LEGAL NAME OF THE APPLICANT

TESCOM Int. Comm Inc.

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

TESCOM Int. Comm. Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 150 N. Park RD #707

CITY Hollywood

STATE & ZIP CODE FL 33021

4. TYPE OF ORGANIZATION (CHECK ONE) [X]

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RECEIVED  
APR 6 10 51 AM '99  
ADMINISTRATION  
MAIL ROOM

<b>WESTERN UNION</b>	<b>MONEY ORDER</b>	<b>INTEGRATED PAYMENT SYSTEMS INC. - ISSUER</b> Englewood, Colorado
	02-176108603	
<small>PAY EXACTLY NOT GOOD FOR OVER \$500 PAY TO THE ORDER OF</small>	<small>ACCOUNT NO. DATE</small> 040298 <small>TIME</small> 1:25 PM <small>02176108603 LOCATION</small> 010575 <b>100.00</b> <small>XXXX XXXX</small>	<small>PURCHASE BY SIGNING YOUR NAME TO THE TERMS ON THE REVERSE SIDE</small> <i>[Signature]</i> <small>AUTHORIZED REPRESENTATIVE</small>
ONE HUNDRED DOLLARS AND NO CENTS <small>XXXX XXXXXX</small>		
<small>PURCHASER'S ADDRESS</small> <i>Florida Rep. Sec. Comm</i>		