



Public Service Commission

ORIGINAL

-M-E-M-O-R-A-N-D-U-M-

DATE: June 25, 1998

TO: Blanca Bayo, Director, Division of Records and Reporting

FROM: Nancy Pruitt, Division of Communications MP

RE: Title Change for Docket No. 980743-TC

Staff requests the following Docket Title change:

Application for certificate to provide pay telephone service by FerrTell, Inc.

Attached is a copy of the Secretary of State corporation approval and original replacement pages numbered 9 and 10 for the application.

c: Legal (K. Pena)

ACK _____ AFA _____ APP _____ CAF _____ CMU _____ CTR _____ EAG _____ LEG _____ LIN _____ OPC _____ RCH _____ SEC _ WAS _ OTHSCALDANYE

DOCUMENT NUMBER-DATE

FLC	ORIDA	PAY	TEL	EPHONE	CERTIFIC	ATE	APPLICATION	
-----	-------	-----	-----	--------	----------	-----	-------------	--

ATTACHMENT B

MAILROOM

[]

(X)

CMU

JUN 24 MH II:

1. LEGAL NAME OF THE APPLICANT FERTELL, Inc.

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS,

FerrTell, Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 7501 SW 395t

CITY Miani

STATE & ZIP CODE F1. 33155

- 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:

POP

DOCUMENTATION: Attach proof that articles of incorporation have beenfiled 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: Amarilan	oyer	<u>Kanana ang ang ang ang ang ang ang ang an</u>
NAME: Amerilan ADDRESS 343 AL	meria Au	¢.
Coral Gal	oles, Fl.	33134
		RECEIVED
M PUBLIC BERVICE COMMISSION/CMU 32 (R3-43) JURED BY COMMISSION RULE NO. 25-24.511	9	1.JUN 2 4 1998

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

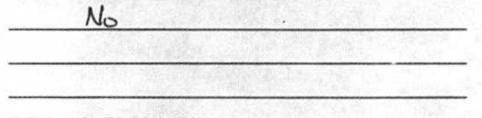
DOCUMENTATION: Attach proof that a fictitious name(s) has been registered with the Florida Secretary of States Office.

[]

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

NAME:	David Former
TITLE:	President
PHONE:	GOS) 262-1470

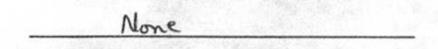
6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELED PAY TELEPHONE CERTIFICATES.



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

LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE.



FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-62) REGUIRED BY COMMISSION RULE NO. 25-24 511



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 19, 1998

AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL

The Articles of Incorporation for FERRTELL, INC. were filed on May 19, 1998 and assigned document number P98000044907. Please refer to this number whenever corresponding with this office regarding the above corporation.

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 INSURE THAT YOU RECEIVE THE FEI NUMBER IN TIME TO FILE THE ANNUAL REPORT. TO OBTAIN A FEI NUMBER, CONTACT THE IRS 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: 098A00027816

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314