DEPOSIT

DATE

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NOV 0 6 1997 ATTACHMENT B

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

NAME UNDER WHICH THE APPLICANT WILL D	OO BUSINESS
Colonial System's, Inc	
ADDRESS OF THE APPLICANT(S)	
STREET 308 Egret Lane	
city <u>Weston</u>	
STATE & ZIP CODE_F1 33327	
TYPE OF ORGANIZATION (CHECK ONE) √	,
A. INDIVIDUAL DOING BUSINESS UNDER HIS OWN NAME:	S/HER ()
DOCUMENTATION: No other documentation nee	ded.
B. PARTNERSHIP:	(1
DOCUMENTATION: Attach a copy of the partnersh name and address of all partners.	nip agreement, and a list with the
C. CORPORATION:	1×1
DOCUMENTATION: Attach proof that articles of in filed with the Florida Secretary of State's Office, If attach proof from the Florida Secretary of State that a in Florida and provide name and address of Florida	f incorporated outside of Florida. applicant has authority to operate
NAME	

11



	ADDRESS	
	DOCUMENT	BUSINESS UNDER A FICTITIOUS NAME: () ATION: Attach proof that a fictitious name(s) has been registered with
i.	PROVIDER	NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL SPONSIBLE FOR COMMISSION CONTACTS:
	NAME:	Scott Coloney
	TITLE:	Vice President
	PHONE:	954-389-4475
	OR IN THE CO OF THE APP CERTIFICAT	ANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER PLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND PAY TELEPHONE CERTIFICATES.
	IF THE ANS	WER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE TE HOLDER AND CERTIFICATE NUMBER.
	LIST THE S	TATES IN WHICH THE APPLICANT:
	A. IS CU	RRENTLY PROVIDING PAY TELEPHONE SERVICE

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

	B.	AS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY ELEPHONE PROVIDER.		
		Abae		
	C.	HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.		
		None		
	D,	HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES, EXPLAIN CIRCUMSTANCES.		
		- None		
9.	OR	ASE INDICATE IF ANY OFFICERS OF THE CORPORATION, PARTNERSHIP INDIVIDUAL APPLICANT HAVE BEEN ADJUDGED BANKRUPT, MENTALLY OMPETENT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR ETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.		
	_	None		
	_			
10.	PLE	ASE CHECK THE SERVICES THAT WILL BE PROVIDED:		
	LON	NG DISTANCE		

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

	CALLING CARD CREDIT CARD OTHER, DESCRIBE
	Pay telephones will permit access for all roun
11,	(Oxxx Direct Dialed long distance, Calling and a credit card usage. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 100
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.
	Full access to all carriers will be
	ayailable

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.) All Pay telephone installations will			
	be in full accordance with all ADA			
	requirements.			

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)

(SIGNATURE OF OWNER/CH EF OFFICER OF APPLICANT)

DATE: Oct 27 97

DAYS OF THE CHAMGE

APPLICANT ACKNOWLEDGMENT CARD

Applicant	Acr	MI (X	Scott	Coloney
acknowledge Rules and Req	receipt and under uirements relating	rstanding of the Fi g to my provision o	lorida Public Serv of Pay Telephone	ice Commission's Service.
	- 4			
Signature: _	J. M	l		<u> </u>
Title:	V.P			
Date: _	Noven	me- 4	1417	

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.



Bepartment of State

I certify the attached is a true and correct copy of the Articles of incorporation of COLONIAL SYSTEMS, INC., a Florida corporation, filed on August 23, 1996, as shown by the records of this office.

The document number of this corporation is P96000070773.

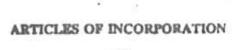
Given under my hand and the Great Seal of the State of Morida. at Tallahasses, the Capitol, this the Twenty-sboth bay of August, 1996



Sonka B. Mortlan

Sandra B. Mortham

PELLE PARTE TO THE PARTE OF THE



COLONIAL SYSTEMS, INC.

OF

The undersigned hereby adopt the following Articles of Incorporation for the purpose of forming a corporation under the laws of the State of Florida:

ARTICLE I - NAME

The name of the corporation is:

COLONIAL SYSTEMS, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal office, if known, and a mailing address of the corporation is an follows:

Principal Office

Mailing Address

308 Egret Lane

Same

Fort Lauderdale, Florida 33327

ARTICLE III - COMMENCEMENT AND DURATION

The corporation shall commence its corporate existence on the date of the filing of these Articles of Incorporation, and shall exist perpetually thereafter until dissolved according to law.

ARTICLE IV - PURPOSE

The corporation is organized for the purpose of transacting any and al! lawful business.

ARTICLE V - AUTHORIZED SHARES

The corporation is authorized to issue 7,500 shares of One Dollar (\$1.00) par value common stock.

The shares of stock may be issued for such consideration, having a value not less than the par value, if any, of the shares issued therefor, as is determined from time to time by the board of directors, to be paid, in whole or in part, in cash or other property. Shares may not be issued until the full amount of the consideration therefor has been paid. Thereafter, such shares shall be deemed to be fully paid and nonassessable.



The corporation shall have two (2) directors initially. The number of directors may thereafter be increased or decreased from time to time in accordance with the bylaws of the corporation.

The name and address of the initial directors who shall hold office until their successor, who shall be chosen at the first meeting of the shareholders have qualified, shall be:

Name	Address

Scott Coloney 308 Egret Lane

Fort Lauderdale, Florida 33327

Jennifer Coloney 308 Egret Lane
Fort Lauderdale, Florida 33327

ARTICLE VII - INDEMNIFICATION

The corporation shall indemnify any present or former officer or director, or person exercising powers and duties of a director, to the full extent now or hereafter permitted by law.

ARTICLE VIII - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the board of directors and shareholders, but the board of directors may not alter, amend or repeal any bylaws adopted by the shareholders if the shareholders provide that the bylaws shall not be altered, amended or repealed by the board of directors.

ARTICLE IX - AMENDMENT

These articles of incorporation may be amended at any time by a vote of the majority of the voting stock of the corporation outstanding, at any regular meeting of the shareholders or at any special meeting of the shareholders called for that purpose.

ARTICLE X - INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation is

Leonard H. Marks, Esquire 500 East Kennedy Blvd. Tampa, Florida 33602

ARTICLE XI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 308 Egret Lane

Ft. Lauderdale, Florida 33327, and the name of the initial registered agent of the corporation

at that address is Scott Coloney.

IN WITNESS WHEREOF, the undersigned, as incorporator hereby executes these articles of incorporation this 215 day of August, 1996.

EONARD H. MARKS

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 2152 day of August, 1996, by Leonard H. Marks, who is personally known to me and who did not take an oath.

ADA M FALIDIDAM

My Convenionius CCREETION

Expires Ann. 17, 8000

(SEAL) My commission expires: 9an 17, 2000

Ala M. Halkingham. Notary Public Print Name: Ala M. Halkingham DEPOSIT

DATE

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FPSC-RECORDS/REPORTING

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

	PLORIDA PAY TELEPHONE CERTIFICATE	APPLICATION
L.	LEGAL NAME OF THE APPLICANT Colonial	Systems. Inc.
2.	NAME UNDER WHICH THE APPLICANT WILL DO B	USINESS
3.	ADDRESS OF THE APPLICANT(S)	
	STREET 308 Egget Lane	
	CITY Weston	
	STATE & ZIP CODE F 1 33327	
4.	TYPE OF ORGANIZATION (CHECK ONE) √	
	A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER OWN NAME:	s ()
	DOCUMENTATION: No other documentation needed.	
	B. PARTNERSHIP:	()
	DOCUMENTATION: Attach a copy of the partnership agrame and address of all partners.	reement, and a list with the
	C. CORPORATION:	×
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	asBeenk A (South)	DOCUMENT NUMBER-DATE
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