

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION
DEPOSIT

DATE

1. LEGAL NAME OF THE APPLICANT

D555 -

JUN 30 1997

MOISES RODRIGUEZ

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

KOINPHONE INC.

97043-TC

3. ADDRESS OF THE APPLICANT(S)

STREET

3812 REDDITT RD.

CITY

ORLANDO

STATE & ZIP

FL 32822

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

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

[]

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

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

NAME: MOISES RODRIGUEZ

TITLE: PRESIDENT

PHONE: (407) 384-6086

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 CANCELLED 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

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 INCOMPETANT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR WHETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.

NO

10. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

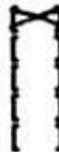
LOCAL
LONG DISTANCE
COIN
CALLING CARD
CREDIT CARD
OTHER, DESCRIBE



11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 25

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

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (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: _____

6/24/97

APPLICANT ACKNOWLEDGEMENT CARD

Applicant MOISES RODRIGUEZ

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

Signature Moises Rodriguez

Title PRESIDENT

Date 6/24/97

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

June 10, 1997

MOISES RODRIGUEZ
 3812 REDITT ROAD
 ORLANDO, FL 32822

The Articles of Incorporation for KOINPHONE INC. were filed on June 9, 1997 and assigned document number P97000051126. 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.

Sharon Tala, Document Specialist Supervisor
 New Filings Section

Letter Number: 597A00031199

JUN 10 9 53 AM '97
 MAIL ROOM

DOCUMENT NUMBER-DATE

06514 JUN 30 5

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

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of KOINPHONE INC., a Florida corporation, filed on June 9, 1997, as shown by the records of this office.

The document number of this corporation is P97000051126.

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



CR2EO22 (2-95)

Sandra B. Northam

Sandra B. Northam
Secretary of State

97 JUN -9 PM 1:07
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
OF
KOINPHONE INC.

The undersigned subscriber to these Articles of Incorporation make, subscribe and acknowledge the following Articles of Incorporation under the laws of the State of Florida.

ARTICLE I - NAME OF CORPORATION

The name of the Corporation shall be:
KOINPHONE INC.

ARTICLE II - TERM OF EXISTENCE

The Corporation shall begin its corporate existence as of felling of these Articles of Incorporation and shall exist perpetually.

ARTICLE III - GENERAL PURPOSE

This Corporation is organized for the purpose of transacting any and all lawful business for the Corporation organized under the Business Corporation Act of the State of Florida.

ARTICLE IV - CAPITAL STOCK

The aggregate number of share which the Corporation shall have authority to issue shall be 100 shares of common stock with a par value of \$1.00 per share.

ARTICLE V - PRINCIPAL OFFICE

The principal place of business of the Corporation shall be:

3812 Reditt Rd.
Orlando, Fl.32822

The Board of Directors may from time to time designate such other address and place for the principal office of this Corporation as it may see fit.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The initial registered agent of the Corporation shall be Moises Rodriguez at the registered address of 3812 Reditt Rd. Orlando, Fl.32822.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

A. The initial number of directors of the Corporation shall be one (1).

B. The number of Directors of the Corporation may be increased or decreased from time to time pursuant to the By-Laws accepted by the shareholders, but shall never be less than a minimum number of directors required by applicable law.

C. The name and address of the initial member of the Board of Directors, who shall hold office until their successors are duly elected and qualified, are:

Moises Rodriguez	3812 Reditt Rd. Orlando, Fl.32822
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ARTICLE VIII - INCORPORATION

The name and address of the person signing these Articles of Incorporation is:

Moises Rodriguez	3812 Reditt Rd. Orlando, Fl.32822
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ARTICLE IX - AMENDMENT TO ARTICLES

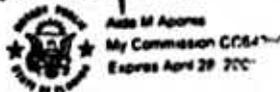
These Articles of Incorporation may be amended in any manner permitted by law.

ARTICLE X - RESTRICTIONS ON TRANSFER OF STOCKS

Shares held by shareholders may not be resold or otherwise transferred to other persons unless such shares are first offered to the remaining shareholders and to the corporation. The price and terms at which, and the time within which, such shares may be offered and sold shall be further specified and set forth in the By-Laws.

IN WITNESS WHEREOFF, the subscriber affixed their signatures this 5th day of June, 1997.

Aida M. Aponte



Moises Rodriguez
Moises Rodriguez

STATE OF FLORIDA
COUNTY OF ORANGE.

The foregoing Articles of Incorporation were acknowledged before me this 5th day of June, 1997, by Moises Rodriguez who has produced his Florida Driver License as identification, who did not take an oath and who executed the foregoing Articles of Incorporation./



Aida M. Aponte
My Commission CC642901
Expires April 28, 2001

Aida M. Aponte

ACCEPTANCE BY REGISTERED AGENT

The undersigned, Moises Rodriguez, as registered agent appointed in accordance with the foregoing Articles of Incorporation, does hereby accept such appointed, and does hereby state that he is familiar with and accepts the obligation imposed pursuant to Florida Statutes 607.325 of the Florida Professional Service Corporations Act.

Moises Rodriguez
Moises Rodriguez

5:11:00
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JUN -9 PM 1:07

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NAME _____

ADDRESS _____

[]

MOISES RODRIGUEZ
OR CLARA RODRIGUEZ

3454

has been registered with

6/24/97

PAY TO THE
ORDER OF

Florida Public Serv. Comm.

\$ 100.00

ONE hundred & 00/100

DOLLARS

BARNETT BANK

807 211
1000 E SEMORAN BLVD
ORLANDO, FL 32822

FOR APPLICATION FEE

Moises Rodriguez