

971526-TC

DEPOSIT

DATE

ATTACHMENT B

D 6 5 8

NOV 19 1997

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT TSC Payphone Corp.

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS _____

TSC Payphone Corp.

3. ADDRESS OF THE APPLICANT(S)

STREET 14100 San Pedro, Suite 400

CITY San Antonio

STATE & ZIP CODE Texas 78232

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER OWN NAME: ()

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP: ()

ACK _____ DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the
AFA _____ name and address of all partners.
ADD _____

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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: (X)

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 CT Corporation System

TSC PAYPHONE CORP.

VIA OVERNIGHT DELIVERY

November 18, 1997

Florida Public Service Commission
c/o Records & Reporting
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

971526-TC

Re: Application of TSC Payphone Corp. for a PATS Certificate

Dear Sir or Madam:

Enclosed herein for filing with the Florida Public Service Commission ("Commission") please find an original and two (2) copies of the Application of TSC Payphone Corp. ("TSC") for a Certificate to provide Pay Telephone Services throughout the State of Florida.

Also enclosed is a check in the amount of \$100.00 as payment for the application fee and one (1) copy of TSC's Certificate of Authority on file with the Florida Secretary of State.

While no provision for expedited treatment of applications exists in the Commission's Rules, TSC respectfully requests that its Application be processed in an expedited fashion.

For verification of receipt, please date-stamp the enclosed copy of this cover letter and return it to the undersigned at your earliest convenience. Please contact the undersigned at (210) 352-1488 with any questions, comments or further requirements regarding this matter. Your courtesies are greatly appreciated.

Very truly yours,

TSC PAYPHONE CORP.



Rick Cantu
Manager of Regulatory Affairs