

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

# 0667  
\$100.00

Jar

4/9/96

960471-TC

1. LEGAL NAME OF THE APPLICANT

Larry L. Sacco

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

New Limits Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 5757 #4 Calais Blvd. No.

3636

CITY St. Petersburg

STATE & ZIP Florida 33714

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.

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APR 11 8 06 AM '96  
ADMINISTRATION  
MAIL ROOM

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

NAME: Larry L. Sacco  
TITLE: President of New Limits Inc.  
PHONE: 813-530-3222

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.

None  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

LOCAL	[ X ]
LONG DISTANCE	[ X ]
COIN	[ X ]
CALLING CARD	[ X ]
CREDIT CARD	[ X ]
OTHER, DESCRIBE	[ ]

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

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

PERSONALLY	[ X ]
FULL-TIME TECHNICIAN	[ ]
PART-TIME TECHNICIAN	[ ]
SERVICE/REPAIR/MAINTENANCE CONTRACT	[ ]
OTHER, DESCRIBE	[ ]

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12. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA 10XXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

Yes

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13. 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

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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.

Larry L. Acco  
(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: April 9th, 1996

APPLICANT ACKNOWLEDGEMENT CARD

Applicant Larry L. Sacco, Pres. of New Limits 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 Larry L. Sacco

Title President of New Limits Inc.

Date April 9th, 1996

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**  
**Jim Smith**  
Secretary of State

May 26, 1994

Park, Rodnite And Ossian, P.A.  
1150 Cleveland Street  
Suite 400  
Clearwater, FL 34615

The Articles of Incorporation for NEW LIMITS, INC. were filed on May 23, 1994, and assigned document number P94000039664. Please refer to this number whenever corresponding with this office.

Enclosed is the certification requested.

A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date year. A Federal Employer Identification (FEI) number will be required before this report can be filed. Please apply NOW with the Internal Revenue Service by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have questions regarding corporations, please contact this office at the address given below.

Brenda Baker  
Corporate Specialist  
New Filings Section  
Division of Corporations

Letter Number: 394A00025407

RECEIVED  
MAY 2 1994  
Division of Corporations

RECEIVED

MAY 31 1994

Andrew J. Koussie, Jr.

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 NEW LIMITS, INC., a Florida corporation, filed on May 23, 1994, as shown by the records of this office.

The document number of this corporation is P94000039664.

Given under my hand and the  
Great Seal of the State of Florida,  
at Tallahassee, the Capital, this the  
Twenty-sixth day of May, 1994



CR2EO22 (2-91)

*Jim Smith*

Jim Smith  
Secretary of State

**ARTICLES OF INCORPORATION**  
**of**  
**NEW LIMITS, INC.**

FILED  
24 MAY 23 AM 8:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscribers to these Articles of Incorporation, being natural persons competent to contract, hereby form a corporation for profit under the Florida General Corporation Act under the laws of the State of Florida.

**ARTICLE I - NAME OF CORPORATION**

The name of this corporation is NEW LIMITS, INC.

**ARTICLE II - GENERAL NATURE OF BUSINESS**

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, State of Florida, or any other state, country, territory or nation.

**ARTICLE III - CAPITAL STOCK**

A. The aggregate number of shares of capital stock authorized to be issued by this corporation shall be 1,000 shares of common stock with a par value of \$1.00 per share. Each share of said stock shall entitle the holder thereof to one vote at every annual or special meeting of the stockholders of this corporation. The consideration for the issuance of such shares of capital stock may be paid, in whole or in part, in cash, or in other property (tangible or intangible), at a fair valuation to be fixed by the

Board of Directors. When issued, all shares of stock shall be fully paid and non-assessable.

**ARTICLE IV - TERM OF EXISTENCE**

The date when corporate existence shall begin is as of the date of execution of these Articles of Incorporation by the subscribers, and the corporation shall exist perpetually thereafter unless dissolved by law.

**ARTICLE V - ADDRESS OF CORPORATION**

The initial street address of the principal office of this corporation in the State of Florida will be 529 80th Avenue, St. Petersburg Beach, Florida 33706. The Board of Directors shall have the power to establish branch offices, and to move the principal office to any other address in Florida.

**ARTICLE VI - BOARD OF DIRECTORS**

A. The initial number of Directors of this corporation shall be two (2). The number of Directors may be increased or diminished from time to time by By-Laws adopted by the stockholders, but shall never be less than one (1).

B. The names and street addresses of the initial members of the Board of Directors, who shall hold office for the first year of existence of this corporation or until their successors are duly elected and qualified are:

<u>NAMES</u>	<u>ADDRESSES</u>
Larry L. Sacco	5757 #4 Calais Boulevard N. St. Petersburg, FL 33714
Rolf M. Tschanz	529 80th Avenue St. Petersburg Beach, FL 33706

C. Any Director may be removed from office by the holders of a majority of the stock entitled to vote thereon at any annual or special meeting of the stockholders, for any reason.

D. In case one or more vacancies shall occur in the Board of Directors by reasons of death, resignation or otherwise, the vacancies shall be filled by vote of the holders of a majority of stock entitled to vote thereon at the next annual meeting or at a special meeting called for the purpose of filling such vacancies.

#### ARTICLE VI - INCORPORATORS

The names and addresses of the incorporators to these Articles of Incorporation are:

<u>NAMES</u>	<u>ADDRESSES</u>
Larry L. Sacco	5757 #4 Calais Boulevard N. St. Petersburg, FL 33714
Rolf M. Tschanz	529 80th Avenue St. Petersburg Beach, FL 33706

#### ARTICLE VIII - BY-LAWS

A. The power to adopt the By-Laws of this Corporation to alter, amend or appeal the By-Laws, or adopt new By-Laws shall be vested in the Board of Directors of this Corporation; provided, however, that any By-Law or amendment thereto as adopted by the Board of Directors may be altered, amended, or repealed by all of the stockholders entitled to vote thereon, or a new By-Law in lieu thereof may be adopted by vote of the stockholders.

B. The By-Laws of this Corporation shall be for the government of this Corporation and may contain any provisions or

requirements for the management or conduct of the affairs and business of this corporation, provided the same are not inconsistent with the provisions of these Articles of Incorporation, contrary to the laws of the State of Florida or of the United States.

**ARTICLE IX - AMENDMENT**

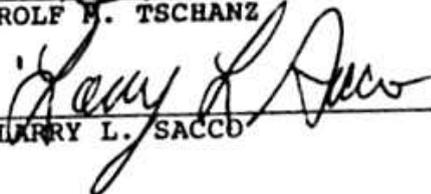
These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by a majority of the shares of stock entitled to vote thereon, unless all the Directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

**ARTICLE X - REGISTERED AGENT**

Rolf M. Tschanz, whose address is 529 80th Avenue, St. Petersburg Beach, Florida 33706, is authorized to accept service of process as registered agent for this corporation.

IN WITNESS WHEREOF, the undersigned have hereunto set their hands and seals this 16 day of May, 1994.

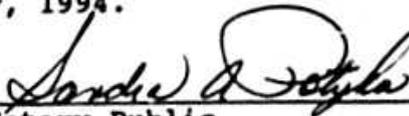
  
\_\_\_\_\_  
ROLF M. TSCHANZ (SEAL)

  
\_\_\_\_\_  
LARRY L. SACCO (SEAL)

STATE OF FLORIDA  
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, personally appeared Rolf M. Tschanz, to me well known to be one of the individuals described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he subscribed the said instrument for the uses and purposes set forth therein.

WITNESS my hand and seal in the County and State last aforesaid, this 16 day of May, 1994.

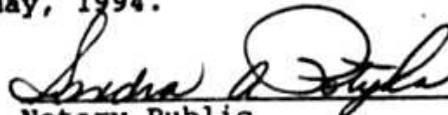
  
\_\_\_\_\_  
Notary Public  
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXP. NOV. 26, 1995  
BONDED THRU GENERAL INS. UND.

STATE OF FLORIDA  
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, personally appeared Larry L. Sacco, to me well known to be one of the individuals described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he subscribed the said instrument for the uses and purposes set forth therein.

WITNESS my hand and seal in the County and State last aforesaid, this 16 day of May, 1994.

  
\_\_\_\_\_  
Notary Public  
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXP. NOV. 26, 1995  
BONDED THRU GENERAL INS. UND.

FILED

94 MAY 23 AM 8:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT**

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby accept the designation to act in this capacity and agree to comply with the provisions of law relative to keeping open the corporation's office.



\_\_\_\_\_  
ROLF M. TSCHANZ

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

# 0667  
\$100.00  
Luf  
4/9/96

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Larry L. Sacco

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

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3. ADDRESS OF THE APPLICANT(S)

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CITY St. Petersburg

STATE & ZIP Florida 33714

3686

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OWN NAME.

DOCUMENTATION: No other documentation needed.

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NAME \_\_\_\_\_

RECEIVED  
APR 11 8 06 AM '96  
ADMINISTRATION  
MAIL ROOM

NEW LIMITS  
5757 CALAIS BLVD. NO. 4  
ST. PETERSBURG, FL 33714

April 9th, 96

0667

Florida Public Service Commission

\$100.00

One Hundred Dollars and No CentsXXXXXXXXXXXX DOLLARS

Application Fee

been registered with