

971087-TC

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT (Tym C. Davidson) SEC. TREAS.
ISLAND COAST PAY PHONES, INC. DEPOSIT _____ DATE _____

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS D598 AUG 22 1997
SAME

3. ADDRESS OF THE APPLICANT(S)
 STREET 11580 CHITWOOD DR. #105
 CITY FT MYERS FLA 33908
 STATE & ZIP FLORIDA 33908

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.

REC'D
 26. HV 00 01 22 99
 DOCUMENT NUMBER-DATE
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 FPSC-RECORDS/REPORTING

D. HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES. EXPLAIN CIRCUMSTANCES.

NONE

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.

NONE

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: 20

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

3. 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

4. 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

APPLICANT ACKNOWLEDGEMENT CARD

Applicant ISLAND COAST PAYPHONE 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 [Handwritten Signature]

Title SECRETARY TREASURER

Date 8-20-97

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.

THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE
PROCEEDING 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.
37.06, 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.

 SEC. TREAS.
(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 8-20-97

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PLAN & PLAN TA 400

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of ISLAND COAST PAYPHONE, INC., a Florida corporation, filed on August 15, 1997 effective August 13, 1997, as shown by the records of this office.

The document number of this corporation is P97000070875.

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



CR28022 (2-95)

Sandra B. Northam

Sandra B. Northam
Secretary of State



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 15, 1997

ARCHIE J. RYAN III, ESQ.
700 E DANIA BEACH BLVD
DANIA, FL 33004-3090

The Articles of Incorporation for ISLAND COAST PAYPHONE, INC. were filed on August 15, 1997, effective August 13, 1997 and assigned document number Pg7000070875. 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.

Pamela Hall, Document Specialist
New Filings Section

Letter Number: 997A00041454

ARTICLES OF INCORPORATION
OF
ISLAND COAST PAYPHONE, INC.

57 AUG 15 2011
TALLAHASSEE, FLORIDA

I, THE UNDERSIGNED, desiring to form a corporation under the laws of the State of Florida, providing for the formation, liabilities, rights, privileges, and immunities of corporation for profit, DO HEREBY CERTIFY AS FOLLOWS:

ARTICLE I

NAME OF CORPORATION

The name of the corporation shall be ISLAND COAST PAYPHONE, INC.

ARTICLE II

CORPORATE EXISTENCE

This corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE III

GENERAL NATURE OF BUSINESS

The general nature of business of this corporation shall be as follows:

1. The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida, including, but not limited to, building construction, the

purchase, sale, development, rental and management of real estate in the United States and foreign countries and to perform such other related activities incidental to the general purpose of this corporation, and to generally do any and all things necessary, pertinent, or convenient to the powers herein and hereby conferred.

2. To transact the business of investing on behalf of itself or others, any part of its capital and such additional funds as it may obtain or any interest therein, either as tenant in common or otherwise, and selling or otherwise disposing of the corporation, and the enjoyment and exercise thereof, as conferred by the laws of the State of Florida upon corporation for profit.

ARTICLE IV

CAPITAL STOCK

The amount of the authorized capital stock of this corporation shall be One Thousand (1,000) shares of common stock, with a par value of One Dollar (\$1.00) per share. All of said stock shall be payable in cash, property, labor or services, at a just valuation to be fixed by the Board of Directors, at a meeting called for that purpose.

ARTICLE V

PRINCIPAL PLACE OF BUSINESS

The principal place of business of this corporation and the street address of its corporate office shall be at 11580 Chitwood Drive, Suite 105, Fort Myers, Florida 33908, with the privilege of having branch offices at other places within or without the State

of Florida, and within or without the United States of America, and the name of its initial registered agent is SCOTT DAVIDSON, whose address is 11580 Chitwood Drive, Suite 105, Fort Myers, Florida 33908.

ARTICLE VI

AMOUNT OF CAPITAL TO BEGIN BUSINESS

The amount of capital with which this corporation shall commence business shall not be less than Five Hundred and 00/100th (\$500.00) Dollars.

ARTICLE VII

NUMBER OF DIRECTORS

The number of directors of this corporation shall not be less than one (1) nor more than four (4).

ARTICLE VIII

DIRECTORS

The names and post office addresses of the first Board of Directors of this corporation shall be two (2) in number, and who shall hold office for the first year, or until their successors are elected and have qualified, shall be:

SCOTT DAVIDSON
11580 Chitwood Drive, Suite 105
Fort Myers, Florida 33908

TYM DAVIDSON
11580 Chitwood Drive, Suite 105
Fort Myers, Florida 33908

ARTICLE IX

INCORPORATOR

The name and address of the incorporator to the Articles of Incorporation is:

SCOTT DAVIDSON
11580 Chitwood Drive, Suite 105
Fort Myers, Florida 33908

ARTICLE X

SPECIAL CHARTER PROVISIONS

Directors and Officers of this corporation need not be Stockholders.

ARTICLE XI

DATE OF COMMENCEMENT

The date of commencement of corporate existence of this corporation shall be on the 13th day of August, 1997.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this 13th day of August, 1997.




SCOTT DAVIDSON

STATE OF FLORIDA)
)
COUNTY OF BROWARD)

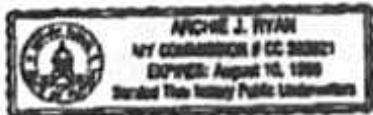
PERSONALLY APPEARED before me, the undersigned authority, SCOTT DAVIDSON, who is personally known to me, to me known to be the person described in and who executed and subscribed to the foregoing Articles of Incorporation, and he acknowledged before me that he executed and subscribed to the same for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Dania, Broward County, Florida, this 13th day of August, 1997.



Notary Public

My Commissions Expires:



STATE OF FLORIDA
DEPARTMENT OF STATE

Certificate Designating Place of Business or Domicile for the
Service of Process Within This State, Naming Agent Upon Whom Process
May Be Served and Names and Addresses of the Officers and Directors.

The following is submitted, in compliance with Chapter 48-091,
Florida Statutes:

ISLAND COAST PAYPHONE, INC.

a corporation organized (or organizing) under the laws of the State of
Florida, with its principal office at 11580 Chitwood Drive, Suite 105,
in the City of Fort Myers, County of Lee, State of Florida, has named
SCOTT DAVIDSON, located at 11580 Chitwood Drive, Suite 105, in the City
of Fort Myers, County of Lee, State of Florida, as its agent to accept
service of process within this state.

OFFICERS:

<u>NAME</u>	<u>TITLE</u>	<u>SPECIFIC ADDRESS</u>
SCOTT DAVIDSON	President	11580 Chitwood Drive, Suite 105 Fort Myers, Florida 33908
TYM DAVIDSON	Vice President/ Secretary/ Treasurer	11580 Chitwood Drive, Suite 105 Fort Myers, Florida 33908

DIRECTORS:

<u>NAME</u>	<u>SPECIFIC ADDRESS</u>
SCOTT DAVIDSON	11580 Chitwood Drive, Suite 105 Fort Myers, Florida 33908
TYM DAVIDSON	11580 Chitwood Drive, Suite 105 Fort Myers, Florida 33908

Dated this 13th day of August, 1997.

97 AUG 15 10:11:00

TALLAHASSEE, FLORIDA

By: Scott B. Davidson

SCOTT DAVIDSON, President

ACCEPTANCE:

I agree, as Registered Agent, to accept service of process, to keep office open during prescribed hours, and to post my name (and any other officers of said Corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in office as required by Law.

Scott B. Davidson

SCOTT DAVIDSON, Registered Agent

