DEPOSIT

DATE

D763 APR 271998

ATTACHMENT B

					98057
NAME U	AMAT	H THE APPL	ICANT WILL D	O BUSINES	88
ADDRES	S OF THE A	PPLICANT(8)			
STREET	7123	S.W.	115 12	Suit	F#F
CITY	MIAM	I.FL.			2. 3 4 .5.
STATE &	ZIP CODE	33/7	73		
OWN	NAME:		UNDER HISA		1
B. PAR	TNERSHIP:		98	(1
DOCUMEN name and	TATION: Att	sch a copy of partners.	the partnership	agreement,	and a list with
C.) CORE	ORATION:	EIN#65	-0827602	W	1
DOCUMEN	TATION: Att	sch proof the	t articles of inco	orporation h	save been

Feb 16 '98 17:25

D. DOIN	G BUSINESS UNDER A FICTITIOUS NAME:
DOCUMENT with the Fi	NTATION: Attach proof that a fictitious name(s) has been registered prida Secretary of States Office.
PROVIDER WHO IS R	NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL ESPONSIBLE FOR COMMISSION CONTACTS:
NAME:	ALEXANDROS MARATOS
TITLE:	PRESIDENT
PHONE:	(305) 412-0589
SHAREHO PAY TELE	ICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR IN THE CASE OF A CLOSELY HELD CORPORATION ANY LOER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS ACTIVE AND CANCELED PAY TELEPHONE CERTIFICATES.

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

8. LIST THE STATES IN WHICH THE APPLICANT: IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE. A HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY 8. TELEPHONE PROVIDER HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE C. PROVIDER. EXPLAIN CIRCUMSTANCES. HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES, EXPLAIN CIRCUMSTANCES PLEASE INDICATE IF ANY OFFICERS OF THE CORPORATION. PARTNERSHIP OR INDIVIDUAL APPLICANT HAVE BEEN ADJUDGED BANKRUPT. MENTALLY INCOMPETENT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR WHETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

10.	PLEASE CHECK V THE SERVICES THAT WILL BE PROVIDED:					
	LOCAL LONG DISTANCE COIN CALLING CARD CREDIT CARD OTHER, DESCRIBE					
11,	PROPOSED NUMBER OF PLANS TO PLACE IN THE	OF PAY TELEPHONE INSTRI HE FIRST YEAR:	UMENTS THE APPLICANT			
12.	HOW DOES THE APPLIC PAYPHONE?	CAN'T INTEND TO SERVICE	AND MAINTAIN EACH			
	PERSONALLY FULL-TIME TECHNICIAN PART-TIME TECHNICIAN SERVICE/REPAIR/MAINT OTHER DESCRIBE	4	0000			
	PROVIDE ACCESS TO A	TELEPHONES WHICH YOU LL LOCALLY AVAILABLE LO 950-XXXX, AND 1-800? (S	NG DISTANCE			

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. 837.08, 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

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 4/23/92

OF THE CHANGE

APPLICANT ACKNOWLEDGMENT FORM

Applicant _	ALEXANDROS MARATOS
i eckno Commission Service,	owiedge receipt and understanding of the Florida Public Service 's Rules and Requirements relating to my provision of Pay Telephone
Signature:	Aly Hate
77tle:	PRESIDENT
Date:	4/23/98

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.

PLEASE READ!!!

APR 27 AN 8 5!

FLORIDA PUBLIC SERVICE COMMISSION

Application Form

FOR

Certificate to Provide Pay Telephone Service

Within the State of Florida

- A. This form is used for an original application for a certificate to provide pay telephone service within the State of Florida.
- B. A \$100 non-refundable application fee along with the enclosed Applicant Acknowledgement Card must be completed and accompany the application before processing will begin.
- C. If the answer to question #2 is a Fictitious Name or Corporate Name, documentation from the Secretary of States office must accompany your application.
- D. Once a certificate has been granted, regulatory assessment fees will be due for that calendar year regardless of whether or not pay telephones have been installed.
- E. When completing the application, respond to each item. If an item is not applicable, explain why. Failure to respond to any item will result in the application being returned and a delay in the application process.
 - F: Use a separate sheet for each answer which will not fit the allotted space.
 - G. If you have any questions about completing the form, contact the Certificate Section at (904) 413-6556.
 - H. Once completed, the original/plus two (2) copies of this form, along with \$100 application fee, are to be submitted to:

Florida Public Service Commission
Gunter Building, 2540 Shumard Oak Boulevard
Capital Circle Office Center
Tallahassee, FL 32399-0850



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 16, 1998

GAMATEL, INC. 7123 S.W. 115 PLACE SUITE #F MIAMI, FL 33173

The Articles of Incorporation for GAMATEL, INC. were filed on April 16, 1998, and assigned document number P98000034933. Please refer to this number whenever corresponding with this office.

Enclosed is the certification requested. To be official, the certification for a certified copy must be attached to the original document that was electronically submitted and filed under FAX audit number H98000007238.

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.

Neysa Culligan Document Specialist New Filings Section Division of Corporations

Letter Number: 398A00020582



Bepartment of State

I certify from the records of this office that GAMATEL, INC. is a corporation organized under the laws of the State of Florida, filed on April 16, 1998.

The document number of this corporation is P98000034933.

I further certify that said corporation has paid all fees and penalties due this office through December 31, 1998, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code, 398A00020582-041698-P98000034933-1/1, noted below.

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Sixteenth day of April, 1998

Authentication Code: 398A00020582-041698-P98000034933-1/1



CR2EO22 (1-95)

Sendra B. Mortham)

Sandra B. Martham

ARTICLES OF INCORPORATION OF

GAMATEL, INC.

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: GAMATEL, INC.

The principal place of business of this corporation shall be: 7123 S.W. 115 Place, Ste# F
Miami, Florida 33173

ARTICLE II NATURE OF BUSINESS

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

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: (1000) ONE THOUSAND @ \$.10 par value per share.

In the event that any shareholder desires to sell any part of their holdings to an individual not a signatory to this instrument, shall obtain such bona fide offers as they may desire, and report the offers in writing to the secretary, shall mark the offer which they desire to accept. The secretary shall then notify all of the signatories of the proposed offer, and any signatory shall be entitle to a right of first refusal to purchase the shares on the same terms as the accepted offer within 60 Days.

ARTICLE IV TERM OF EXISTENCE

This Corporation is to exist perpetually.

Prepared by: Ruiz & Co., P.A. Page: 1665 W. 68 St., Ste# 206
Hialeah, Florida 33014
(305) 828-1277

Aud# H98000007238-2

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Alexandros H. Maratos Carolina A. Gadala 7123 S.W. 115 Place, Ste# F Miami, Florida 33173

ARTICLE VI AMENDMENT

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the laws of the State of Florida, and all rights conferred upon the shareholders herein are subject to this reservation.

ARTICLE VIII INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to this articles of incorporation is (are):

Alexandros H. Maratos Carolina A. Gadala 7123 S.W. 115 Place, Ste# F Miami, Florida 33173

IN WITNESS WHEREOF, the undersigned Incorporator(s) has (have) executed these Articles of Incorporation this 06th, day of April 1998.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: GAMATEL, INC.

2. The name and address of the registered agent and office is: Alexandros H. Maratos

7123 S.W. 115 Place, Ste# F Miami, Florida 33173

SIGNATURE

TITLE: PRESIDENT

DATE: April 6th, 1998

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE: April 6th, 1998

DATE

D763 APR 2 7 1998

ATTACHMENT B

	FLORIDA PAY TELEPHONE CERTIFICA	TE APPLICATION
L	LEGAL NAME OF THE APPLICANT_Alex	
2.	NAME UNDER WHICH THE APPLICANT WILL DO	D BUSINESS
3.	ADDRESS OF THE APPLICANT(S)	
	STREET 7/23 S.W. 115 /2	SUITE #F
	CITY MIAMI, FL.	
	STATE & ZIP CODE	٠.
4.	TYPE OF ORGANIZATION (CHECK ONE)	
	A. INDIVIDUAL DOING BUSINESS UNDER HISM OWN NAME:	ER ()
	DOCUMENTATION: No other documentation needed	
	B. PARTNERSHIP:	
	DOCUMENTATION: Attach a copy of the partnership a name and address of all partners.	igreement, and a list with the
(C. CORPORATION: EIN # 65-0827602	
	DOCUMENTATION: Attach proof that articles of incor- fied with the Florida Secretary of State's Office. If inco- attach proof from the Florida Secretary of State that operate in Florida and provide name and address of F	rporated outside of Florida.
	MME	
	. 1040	
CAROLINA ALICI. 7123 S.W. 115TH P MIAMI, FL. 3317	LAPILE	2
PAY TO THE ORDER OF LONG	Idic berice Commission \$ 100/100	
one hundred	DOLLARS TOTAL	
Barnett	PREMIER ACCOUNT	
sometimicate to provide	Paytalephone Lewis Bettalina	