

Telesur, LLC.
9594 Doral Blvd., Suite 104
Miami, FL 33178
Tel: 786-245-6900
Fax: 786-206-4451
jkaplan@telesurgroup.com

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DIVISION OF
COMPETITIVE SERVICES

August 4, 2008

Florida Public Service Commission
Division of Telecommunications
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

080525

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COMMISSION
CLERK

Re: Telesur, LLC. - IXC Registration

To Whom It May Concern:

Enclosed please find one (1) original and one (1) copy of Telesur, LLC.'s filing for Registration as an Interexchange Resell Carrier as well as the initial tariff.

Please acknowledge receipt of this filing by returning, file-stamped, the extra copy of this cover letter in the self addressed stamped envelope provided for that purpose.

Questions regarding this filing may be directed to me at 786-245-6900 or emailed to jkaplan@telesurgroup.com.

Sincerely,


Janiza T. Kaplan
Managing Partner

Enclosure

COM _____
ECR _____
GCL _____
OPC _____
RCP _____
SSC _____
SGA _____
ADM _____
CLK _____

* Tariff forwarded to RCP.

DOCUMENT NUMBER-DATE

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FPSC-COMMISSION CLERK

IXC REGISTRATION FORM

Company Name Telesur, LLC.

Florida Secretary of State Registration No. L06000102743

Fictitious Name(s) as filed at Fla. Sec. of State _____

Company Mailing Name Telesur, LLC.

Mailing Address 9594 Doral Blvd., Suite 104, Miami FI 33178

Web Address http://www.telesurgroup.com

E-mail Address jkaplan@telesurgroup.com

Physical Address 9594 Doral Blvd., Suite 104, Miami FI 33178

Company Liaison Janitza T. Kaplan

Title Managing Partner

Phone 786-245-6900

Fax 786-206-4451

E-mail address jkaplan@telesurgroup.com

Consumer Liaison to PSC Janitza T. Kaplan

Title Managing Partner

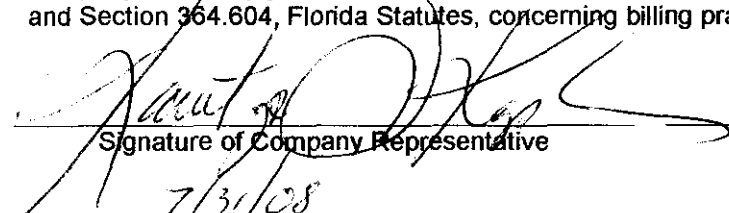
Address 9594 Doral Blvd., Suite 104, Miami FI 33178

Phone 786-245-6900

Fax 786-206-4451

E-mail address jkaplan@telesurgroup.com

My company's tariff as required in Section 364.04, Florida Statutes, is enclosed with this form. I understand that my company must notify the Commission of any changes to the above information pursuant to Section 364.02, Florida Statutes. My company will owe Regulatory Assessment Fees for each year or partial year my registration is active pursuant to Section 364.336, Florida Statutes. My company will comply with Section 364.603, Florida Statutes, concerning carrier selection requirements, and Section 364.604, Florida Statutes, concerning billing practices.


Signature of Company Representative
Date 7/31/08

Janitza T. Kaplan
Printed/Typed Name of Representative

DOCUMENT NUMBER-DATE

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