ZEN Prepaid, LLC

1655 N Commerce Parkway, Suite 301 Weston FL 33326

Tel: (954) 358-4317 Fax: (305) 808-3444

info@zenprepaid.com

June 5, 2009

Florida Public Service Commission Division of Telecommunications 2540 Shumard Oak Blvd. Tallahassee, FL 32399-0850 PECENED-FPSC PECENED-FPSC COMMISSION COMMISSION TO 090342

Re: ZEN Prepaid, LLC - IXC Registration

To Whom It May Concern:

Enclosed please find one (1) original and one (1) copy of ZEN Prepaid, 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 (954) 358-4317 or emailed to info@zenprepaid.com

Sincerely,

Mario Acosta President

Enclosure

COM ____
ECR ___
GCL __
OPC ___
RCP ___
SSC ___
SGA ___
ADM ___
CLK ___

DOCUMENT NUMBER-DATE

06296 JUN 238

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IXC REGISTRATION FORM

Company Name ZEN	Prepaid, LLC
Florida Secretary of State Registration No. <u>L09000050138</u>	
Fictitious Name(s) as filed at Fla. Sec. of State	
Company Mailing Name	ZEN Prepaid, LLC
Mailing Address	1655 N Commerce Parkway, Suite 301, Weston FL 33326
Web Address	www.zenprepaid.com
E-mail Address	info@zenprepaid.com
Physical Address	1655 N Commerce Parkway, Suite 301, Weston FL 33326
Company Liaison	Mario Acosta
Title	Manager
Phone	954 358 4317
Fax	305 808 3444
E-mail address	info@zenprepaid.com
Consumer Liaison to PSC	Mario Acosta
Title	Manager
Address	1655 N Commerce Parkway, Suite 301, Weston FL 33326
Phone	954 358 4317
Fax	305 808 3444
E-mail address	info@zenprepaid.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.	
Il acu	Mario Acosta
Signature of Company Representative Printed/Typed Name of Representative	
06/05/09	
Date ,	

DOCUMENT NUMBER-DATE

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Detail by Entity Name

Florida Limited Liability Company

ZEN PREPAID, LLC

Filing Information

Document Number L09000050138

FEI/EIN Number NONE

Date Filed

05/22/2009

State

FL

Status ACTIVE

Principal Address

1655 N COMMERCE PARKWAY

WESTON FL 33326

Mailing Address

1655 N COMMERCE PARKWAY WESTON FL 33326

Registered Agent Name & Address

MIAMI CORPORATE SYSTEMS, LLC 283 CATALONIA AVE 2ND FLOOR CORAL GABLES FL 33134 US

Manager/Member Detail

Name & Address

Title MGR

ACOSTA, MARIO 1037 CEDAR FALLS DR WESTON FL 33327

Annual Reports

No Annual Reports Filed

Document Images

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Note: This is not official record. See documents if guestion or conflict.

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