

BEFORE THE PUBLIC SERVICE COMMISSION  
OF THE STATE OF MISSOURI

In the matter of the application of

for certificate of service authority  
to provide private pay telephone  
service within the State of Missouri) Complete Telecom Solutions Inc.  
) #7 Soutee  
) St. Peters, MO. 63376  
TA-2000-632

FILED

APR 10 2000

APPLICATION FOR CERTIFICATE OF SERVICE  
AUTHORITY TO PROVIDE PRIVATE PAY TELEPHONE  
SERVICE IN THE STATE OF MISSOURIMissouri Public  
Service Commission

PLEASE PRINT OR TYPE:

Complete Telecom Solutions Inc.4/5/00

1. NAME OF APPLICANT

DATE OF APPLICATION

ADDRESS OF PRINCIPAL PLACE OF BUSINESS:  
Street#7 Soutee Rd.

City

St. Peters

State

MO.

Phone

(636) 397-0556If the Commission or Staff has questions about this  
Application, they should contact

Name:

Thomas Griffith

Address:

#12 Benton Ct.  
O'Fallon, MO. 63366

Daytime Phone

(314) 393-0070\*\*\*\*\*  
APPLICANT IS:

\_\_\_\_ INDIVIDUAL DOING BUSINESS UNDER OWN NAME

\_\_\_\_ INDIVIDUAL DOING BUSINESS UNDER FICTITIOUS NAME (Attach a copy of registration of fictitious name  
with Secretary of State)

\_\_\_\_ PARTNERSHIP (Attach copy of partnership agreement - Missouri Bar Attorney must file the application)

☒ MISSOURI CORPORATION (Attach certified copy of Articles of Incorporation and Certificate of Incorporation  
from Secretary of State - Missouri Bar Attorney must file the application)\_\_\_\_ CORPORATION - NOT MISSOURI (Attach certificate of authorization to do business in Missouri from  
Secretary of State - Missouri Bar Attorney must file the application)\*\*\*\*\*  
- IMPORTANT -PAGES 2, 3, AND 4 MUST BE ATTACHED AND APPLICATION MUST BE SIGNED AND NOTARIZED ON PAGE 4  
TO BE PROCESSED. IF APPLICANT IS A PARTNERSHIP OR CORPORATION, APPLICATION MUST BE SIGNED  
BY AN AUTHORIZED MEMBER OR CORPORATE OFFICER, NOTARIZED, AND SIGNED BY APPLICANT'S  
ATTORNEY.APPLICATION SHOULD BE MAILED TO BOTH:Missouri Public Service Commission  
P.O. Box 360  
Jefferson City, MO 65102  
(Original and 14 copies)Office of the Public Counsel  
P.O. Box 7800  
Jefferson City, MO 65102  
(One copy)

Revised 02/03/98

2. Applicant proposes to provide private pay telephone service in the State of Missouri under the jurisdiction of the Missouri Public Service Commission (Commission) pursuant to Section 382.410 and 382.520 C.C.S.C.S. HB 360 and which is referred to therein as customer owned coin telephone telecommunications service, but will herein be referred to as private pay telephone service, and requests certificate of service authority to install, operate, control, manage and maintain private pay telephone(s).
3. Applicant requests that this certificate of service authority be made applicable to additional locations which may be served by the Applicant in the future.
4. As a provider of private pay telephone service, I agree that my private pay telephone equipment (hereafter "equipment") shall have the following operational characteristics and I agree to abide by the following terms:
  - a. Users of the equipment shall be able to reach the operator without charge and without the use of a coin.
  - b. Any intrastate operator services provider employed shall hold a certificate of service authority from this Commission, and shall have on file with the Commission approved tariffs for the provision of operator services to traffic aggregators.
  - c. Users of the equipment shall be able to reach local 911 emergency service, where available, without charge and without using a coin or, if 911 is unavailable, there shall be a prominent display on each instrument of the required procedure to reach local emergency service without charge and without using a coin.
  - d. The equipment shall be mounted in accordance with all applicable Federal, State, and local laws for disabled and/or hearing impaired persons.
  - e. The equipment shall allow the completion of local and long distance calls.
  - f. The equipment shall permit access to directory assistance.
  - g. There shall be displayed in close proximity to the equipment in 12 Point Times Bold print the name, address and telephone number of the private pay telephone service provider, the procedures for reporting service difficulties, the method of obtaining customer refunds and the method of obtaining long distance access. If applicable, the notice shall state that one-way calling only is permitted. If an alternative operator service (AOS) provider is employed, the private pay telephone service provider shall display such notice as is required by this Commission.
  - h. The equipment shall be registered under Part 68 of the rules of the Federal Communications Commission's registration program.
  - i. The equipment shall not block access to any local or interexchange telecommunications carrier.
5. I understand and agree that the certificate of service authority will permit me to provide only private pay telephone service in the State of Missouri and will not authorize me to provide any other telecommunications services regulated by the Commission.
6. I understand that the certificate of service authority to provide private pay telephone service is not transferable.
7. I understand that providing pay telephone service without a certificate of service authority or in violation of the terms and conditions prescribed for the provision of such service may subject me to penalties as provided for by law.
8. I agree to provide a complete list of served locations if this information is requested by the Commission Staff.

9. I further agree to notify the Commission, in writing, if I cease to provide private pay telephone service in the State of Missouri or if my address or phone number changes at my principal place of business.
10. Unless and until otherwise ordered by the Commission, I agree to pay my annual apportioned share of general regulator expenditures that are charged to telephone companies pursuant to Section 386.370 RSMo.
11. I understand and agree that I will be responsible to the local exchange telephone company for payment of all toll and local charges originating from or accepted at the private pay telephone(s).
12. I understand and agree that charges for private pay telephone service will be assessed in accordance with the appropriate tariff of the local exchange telephone company providing access.

WHEREFORE, Applicant requests the Commission to grant its certificate of service authority to Applicant to install, operate, control, manage and maintain private pay telephone service in the State of Missouri as described above.

SIGN HERE:

PRINT or  
TYPE NAME:

ADDRESS:

PHONE:

Thomas F. Griffith (Secretary)  
Thomas F. Griffith (Secretary)  
#7 Soutree Rd.  
St. Peters, MO. 63376  
636-397-0556

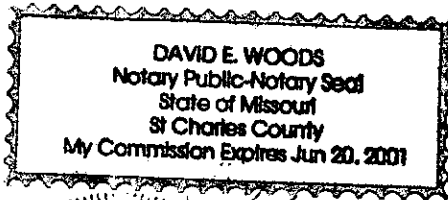
STATE OF Missouri  
COUNTY OF St. Charles

Comes now before me Thomas F. Griffith and states that (s)he  
(Name of person signing Application)

Secretary of Complete Telecom Solutions, Inc. Applicant herein, and  
(Title of person signing Application) (Name of Applicant)

further states that the information contained in this Application is accurate to the best of her/his knowledge and belief.

Subscribed and sworn to before me this 5th day of April, 2000



David E. Woods  
(Notary Public)

My Commission expires: \_\_\_\_\_

ATTORNEY'S SIGNATURE BLOCK (for Partnership or Corporation)

SIGN HERE: David E. Woods

PRINT or

TYPE NAME: David E. Woods

ADDRESS: 300 Ft. Zumwalt Sq. Suit 110  
O'Fallon, Mo 63366

MISSOURI  
BAR #:

# 28779

PHONE:

636-978-4187

No. 00477360

# STATE OF MISSOURI



**Rebecca McDowell Cook**  
**Secretary of State**

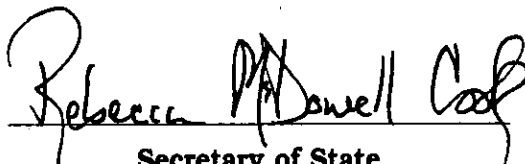
CORPORATION DIVISION

CERTIFICATE OF CORPORATE RECORDS

COMPLETE TELECOM SOLUTIONS, INC.

I, REBECCA McDOWELL COOK, Secretary of State of the State of Missouri and Keeper of the Great Seal thereof, do hereby certify that the annexed pages contain a full, true and complete copy of the original documents on file and of record in this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 6th day of APRIL, 2000.

  
Secretary of State



# STATE OF MISSOURI



**Rebecca McDowell Cook**  
**Secretary of State**

CORPORATION DIVISION  
CERTIFICATE OF INCORPORATION

WHEREAS, DUPLICATE ORIGINALS OF ARTICLES OF INCORPORATION OF  
COMPLETE TELECON SOLUTIONS INC.

HAVE BEEN RECEIVED AND FILED IN THE OFFICE OF THE SECRETARY OF  
STATE, WHICH ARTICLES, IN ALL RESPECTS, COMPLY WITH THE  
REQUIREMENTS OF GENERAL AND BUSINESS CORPORATION LAW;

NOW, THEREFORE, I, REBECCA MCDOWELL COOK, SECRETARY OF STATE  
OF THE STATE OF MISSOURI, BY VIRTUE OF THE AUTHORITY VESTED IN  
ME BY LAW, DO HEREBY CERTIFY AND DECLARE THIS ENTITY A BODY  
CORPORATE, DULY ORGANIZED THIS DATE AND THAT IT IS ENTITLED TO  
ALL RIGHTS AND PRIVILEGES GRANTED CORPORATIONS ORGANIZED UNDER  
THE GENERAL AND BUSINESS CORPORATION LAW.

IN TESTIMONY WHEREOF, I HAVE SET MY  
HAND AND IMPRINTED THE GREAT SEAL OF  
THE STATE OF MISSOURI, ON THIS, THE  
10TH DAY OF DECEMBER, 1999.

*Rebecca McDowell Cook*  
Secretary of State



\$58.00

## **Articles of Incorporation of a For Profit Corporation**

The undersigned natural person of the age of eighteen years or more for the purpose of forming a corporation under The General and Business Corporation Law of Missouri adopts the following Articles of Incorporation:

### **Article One**

The name of the corporation is: Complete Telecon Solutions Inc.

### **Article Two**

The address, including street and number, if any, of the corporation's initial registered office in this state is: 208 East College Street, Suite 121, Branson, MO 65616. Located in the County of Taney and the name of its initial agent at such address is: Business Filings International, Inc.

### **Article Three**

The aggregate number shares the corporation has the authority to issue is two thousand (2,000) shares of common stock with a par value of one cent (\$0.01) per share.

### **Article Four**

The name and place of residence of each incorporator is as follows:

Richard A. Oster, 8025 Excelsior Dr., Suite 200, Madison, WI 53717

### **Article Five**

The number of directors to constitute the board of directors is two (2).

The names and addresses of the initial directors are:

Kimberly E. Nelson, #7 Soutee Rd., St. Peters, Missouri 63366

Lise J. Griffith, #12 Benton Ct., O'fallon, MO 63366

### **Article Six**

The duration of the corporation is perpetual.

### **Article Seven**

The corporation is formed for the following purposes: Initial installation of telecommunications cabling and wiring, upgrading of the same, servicing of telecommunications systems.

FILED AND CERTIFICATE OF  
INCORPORATION ISSUED  
DEC 10 1999  
Rebecca  
SECRETARY OF STATE