PATRICK D. CROCKER

patrick@crockerlawfirm.com

October 2, 2008

Mary Andrews Bane, Director Florida Public Service Commission Capitol Circle Office Center 2540 Shumard Oak Blvd Tallahassee, FL 32399-0850

RE: Sun Vox Telecom, LLC

Dear Ms. Bane:

Enclosed herewith for filing with the Commission, please find an original and six (6) copies of the above captioned corporation's IXC REGISTRATION FORM and Florida Tariff No. 1.

Also enclosed is an exact duplicate of this letter. Please stamp the duplicate received and return same in the postage-paid envelope attached thereto.

Please contact me if you have additional questions or concerns.

Very truly yours,

PROCKER & CROCKER, P.C.

Patrick D. Crocke

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IXC REGISTRATION FORM

Company Name Sun	Vox Telecom, LLC 080626-T
Florida Secretary of State F	Registration No. M0700007477
Fictitious Name(s) as filed a	at Fla. Sec. of State
Company Mailing Name	Sun Vox Telecom, LLC
Mailing Address	1300 PineTree Drive, Suite 12, Indian Harbour Beach, FL 32937
Web Address	www.SunVox.com www.SUNVex.Net
E-mail Address	JOR @ Sun vox. net
Physical Address	1300 PineTree Drive, Suite 12, Indian Harbour Beach, FL 32937
Company Liaison	Joe Rhem
Title	Sr. Managing Partner
Phone	321-989-6727
Fax	321-989-0284
E-mail address	jore survoxinet
Consumer Liaison to PSC	Joe Rhem
Title	Sr. Managing Partner
Address	1300 PineTree Drive, Suite 12, Indian Harbour Beach, FL 32937
Phone	321-989-6727
Fax	321-989-0284
E-mail address	joe @ sun vox.net
understand that my comp pursuant to Section 364.0 each year or partial year company will comply with and Section 364.604. Florid	equired in Section 364.04, Florida Statutes, is enclosed with this form. I any must notify the Commission of any changes to the above information 2, Florida Statutes. My company will owe Regulatory Assessment Fees for my registration is active pursuant to Section 364.336, Florida Statutes. My Section 364.603, Florida Statutes, concerning carrier selection requirements, la Statutes, concerning billing practices. Joe Rhem, Sr. Managing Partner y Representative Printed/Typed Name of Representative
Date C	

DOCUMENT NUMBER-DATE

09370 OCT-38

FPSC-COMMISSION CLERK

EXHIBIT A

Certificate of Authority to Transact Business

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL.C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.I.,C.," "L.I.,C.,"
2. DELAW BRE (1) Unrisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4 13 13 169 S PERPETUAL SEE
(Date of Organization) (Duration: Year limited liability company will coase to exist or "perpetual")
6. (Date first transacted husiness in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1300 PINETREE DR. UNIT 12
INTO MAN HARBOUR BEACH, BL 32937 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
TOURBILLON PARTMERS, LLC
1360 PINETREE DR UNIT 17
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translation must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: TELEPHOLE
SERVICE
Kito las. Wall
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of parjury that the facts stated herein are true.)
Typed or printed name of signee
Aber or homes and a manage