		REQUEST TO ESTABL	plus 1 copy with CLK.)			
Date:	8/11/2011	Docket No.:	110247-TC 11 AUG 12 AM 8:30			
1. From Staff / Division:		Division Of Regulatory Analysis/Toni Earnhart 2 COMMISS				
2. OPR:	Toni Earnhart, R	CLEDY				
3. OCR:	GCO					
4. Sugges	ted Docket Title:	Compliance investigation of PATS apparent first-time violation of Rul Telecommunications Companies.	S Certificate No. 8719, issued to Buddy's Cafe, le 25-4.0161, F.A.C., Regulatory Assessment Fe			
5. Program/Module/Submo		dule Assignment:	A18a, A10			
6. Sugges	sted Docket Mail L	_ist.				
a. Pro	ovide NAMES/ACE	RONYMS, if registered company.	☐ Provided as an Attachment			
Company if applica TH073		address, if different from MCD):	Representatives (name and address):			
b. Pro Company if applica	Code, Intereste	NAME AND ADDRESS for all othered persons, if any, address, if different from MCD):	Representatives (name and address):			
7. Check o	one: 🛛 Sup	porting Documentation Attached	☐ To be provided with Recommendation			
Comment	s:		CAT			
R			NUMBER			

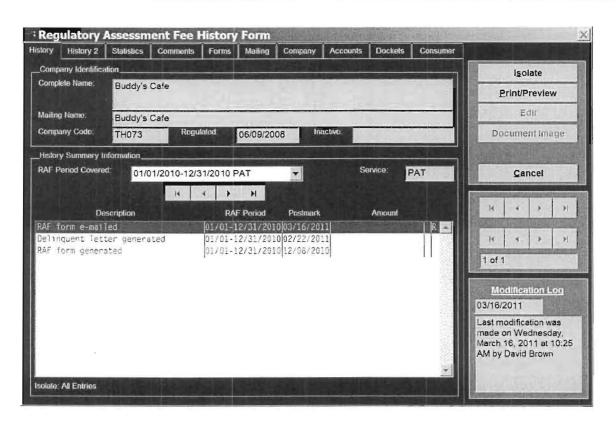
0571

FPSC-COMMISSION CLERK

SSC ADM OPC

CLK V.G.

File Edit View Payments Iools Reports Options Docket Viewer





COMPANY IDENTIFICATION

Printed on 08/09/2011 at 15:41:15 by TJE

Complete Name: Buddy's Cafe

Mailing Name: Buddy's Cafe

Company Code: TH073 FEID Number: 65-0921206

RAF ACCOUNT FOR THE PERIOD 01/01/2010 THROUGH 12/31/2010

Reg. Date: 06/09/2008 Inactive Date:

Service: PAT - Pay Telephone

Received: No RAF Form Status: Pending

status: Pending

Amended: No Extension: No Frozen: No Comments: No

Payment Count: 0 Payments Made to Date

Operating Rev: \$0.00 Interstate Rev: \$0.00

RAF Rate:

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Wednesday, December 8, 2010 at 1:02 PM by David Brown

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X. July Correct Agent Addressee B. Réceived by (Printed Name) C. Date of Delivery 2 2 4-11 M		
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:		
TH073-10-0-D Buddy's Cafe 2431 Beach Court Riviera Beach, FL 33404-4722	11 in YES, enter delivery address below: 🗆 No /		
¥	3. Service Type		
	4. Restricted Delivery? (Extra Fee)		
Article Number (Transfer from service label)	0100 0003 1056 8452		
PS Form 3811, February 2004 Domestic F	Teturn Receipt 102595-02-M-1540		

		141		
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY		
 Complete items 1, 2, and 3. Also complitem 4 if Restricted Delivery is desired. Print your name and address on the revisor that we can return the card to you. Attach this card to the back of the mail or on the front if space permits. 	erse	A. Signature X		
Article Addressed to:		D. Is delivery address different from item 1?		
TH073-10-0-D Buddy's Cafe 2431 Beach Court Riviera Beach, FL 33404-4722				
		3. Service Type Certified Mail Registered Insured Mail C.O.D.		
		4. Restricted Delivery? (Extra Fee) ☐ Yes		
Article Number (Transfer from service label)	7006	0100 0003 1056 8452		
PS Form 3811, February 2004	Domestic Re	eturn Receipt 102595-02-M-1540		

Certified Mail Pro

A mailing receipt
A unique identifier fo
A record of delivery Important Reminders:
Certified Mail is not
Covaluables, please cot
For an additional fee
Gelivery To obtain Re
For an additional fee
Gelivery To obtain Re
For an additional fee
aduplicate return rec
aduplicate return rec
aduplicate return rec
cele is an additional fee
cle at the post offic
receipt is not needed
IMPORTANT: Save th
Internet access to de
addressed to APOs a