INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Section 214 Application–Local Exchange Technologies, LLC

1. Applicant				
Nar	me: Local Ex	xchange Technologies,	Phone Number:	408–264–3355
DBA Nar			Fax Number:	408–264–4255
Stre	eet: 260 S. S	unnyvale Avenue	E-Mail:	dscott@globalvad.com
	Suite 9			
City	y: Sunnyva	ale	State:	CA
Cou	intry: USA		Zipcode:	94086 –
Atte	ention: Darin S	cott		

2. Contact Name: **Phone Number:** Jonathan S. Marashlian 703-714-1313 **Company:** The Helein Law Group LLP Fax Number: 703-714-1330 8180 Greensboro Drive E-Mail: **Street:** jsm@thlglaw.com Suite 700 City: McLean **State:** VA **Country:** Afghanistan Zipcode: 22102 Contact Regulatory Counsel **Relationship:** Legal Counsel Title:

3. Place of Incorporation of Applicant California

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)					
Global or Limited Global Facilities—Based Authority (Section 63.18(e)(1))					
Global or Limited Global Resale Authority (Section 63.18(e)(2))					
Individual Facilities—Based Service (Section 63.18(e)(3))					
Individual Switched Resale Service (Section 63.18(e)(3))					
Individual Facilities–Based and Resale Service (Section 63.18(e)(3))					
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))					
Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))					
Overseas Cable Construction (Section 63.18(e)(3))					
Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))					
Other (Section 63.18(e)(3))					
6a. Is a fee submitted with this application?					
Governmental Entity Noncommercial educational licensee					
Other(please explain):					
6b. Fee Classification CUT – Section 214 Authority					
7. Destination Country(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or "Countries X, Y, and Z only".) All authorized international points.					

8 Caption (descri	ption of authority requested, e.g., Application for Authority to Provide International Facilities-Base	d and Reso	d Services to	_
	Points Except Country X)	a ana reson	id Bei vices to	
	e description does not appear in this box, please go to the end of the form to view it in its entirety.)			
(== :== r === r				
	Application for Authority to Provide Global or Limited Global			
	International Resold Services to All Authorized International Poi	nts.		
				—
		• Yes	$oldsymbol{\circ}$ No	
Attachment I a st	atement of how the application qualifies for streamlined processing.			
10 If applying for	authority to provide switched services over private lines pursuant to Section 63.16, provide the req	uired showi	ng in	_
Attachment 1.	additionly to provide switched services over private lines parsuant to section 03.10, provide the req	unea snowi	ng m	
Applicant contific	as that its magneness to guardians 11 through 17 and through			
Applicant certifie	es that its responses to questions 11 through 17 are true:			
11. If the applicar	at is a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign			
carrier, provide in	Attachment 1 the information and certifications required by Section 63.18(i) through (m).			
				_
		Yes	No	
of Section 63.18(j	i)? If yes, list those destinations in Attachment 1 as a response to question 12.	_	-	

13. Does the applicant seek authority to provide service to any destinations other than those listed in response to question 12 where it has an affiliation with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13.	● N	10
14. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.		
15. In Attachment 1, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	O 1	No
17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.	O 1	Vo

CERTIFICATION

18. Typed Name of Person Signing Darin Scott		19. Title of Person Signing President				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).						
20. 1: Attachment 1	2: Attachment 2	3	3:			

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