INTERNATIONAL SECTION 214 APPLICATION FCC FORM 214 FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: VCONEXION, INC. – International 214 Application

1. Applicant			
Name:	VCONEXION, INC.	Phone Number:	772–224–8000
DBA Name:		Fax Number:	
Street:	7745 Pine Lakes Boulevard	E–Mail:	jesusvilleta@vconexion.net
City:	Port Saint Lucie	State:	FL
Country:	USA	Zipcode:	34952 –
Attention:	Jesus Villeta		

2. Contact					
Name:	Jonathan S. Marashlian	Phone Number:	703–714–1313		
Company:	Helein & Marashlian, LLC	Fax Number:	703–714–1330		
Street:	1483 Chain Bridge Road	E-Mail:	jsm@commlawgroup.com		
	Suite 301				
City:	McLean	State:	VA		
Country:	USA	Zipcode:	22101 –		
Attention:	Jonathan S. Marashlian	Relationship:	Legal Counsel		
3. Place of Incorporation	n of Applicant Florida				
4. Other Company(ies)	and Place(s) of Incorporation				
5. Service Type(s) (chec	ck all that apply)				
Global or Limite	d Global Facilities-Based Authori	ty (Section 63.18(e)(1))			
Global or Limited Global Resale Authority (Section 63.18(e)(2))					
Individual Facilit	Individual Facilities—Based Service (Section 63.18(e)(3))				
Individual Switch	Individual Switched Resale Service (Section 63.18(e)(3))				
Individual Facilit	ties-Based and Resale Service (Sec	ction 63.18(e)(3))			
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))					
Inmarsat and Mo	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	Other (Section 63.18(e)(3))				

	ed with this application? te and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
"	Entity Noncommercial educational licensee
Other(please e.	-
Other (piease e.	Apidin).
6b. Fee Classificati	on CUT – Section 214 Authority
7. Destination Cou "Countries X, Y, an	ntry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or ad Z only".) All authorized international points
All International Po	tion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to oints Except Country X) description does not appear in this box, please go to the end of the form to view it in its entirety.)
	Application for Authority to Provide International Resold Services to All Authorized International Points
Attachment 1 a sta	ant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in tement of how the application qualifies for streamlined processing. Authority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in

Applicant c	ertifies that	its responses	to questions	11 through 1'	7 are true:

15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.

represent certifies that its responses to questions in an ough 17 are true.		
11. If the applicant 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).		
12. Does the applicant seek authority to provide service to any destination described in paragraphs (1) through (4) of Section 63.18(j)? If yes, list those destinations in Attachment 1 as a response to question 12.	O Yes	No
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.	O Yes	No
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.		

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.	•	Yes	٥	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.	•	Yes	٥	No

CERTIFICATION

		19. Title of Person Signing President		
WILLFUL FALSE STATEMENTS MAD (U.S. Code, Title 18, Section 19) (U.S. Code, Title 47, Section 2)	001), AND/OR REV	OCATION OF ANY S	TATION AUTHORIZATION	
20. 1: Attachment 1	2: Attachment 2		3:	

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