## 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: CapeNet LLC – Application for Global Resale Authority

1. Applicant			
Name:	CapeNet LLC	Phone Number:	857–496–1752
DBA Name:		Fax Number:	
Street:	1900 West Park Drive	E-Mail:	slevesque@capenetllc.com
	Suite 280		
City:	Westborough	State:	MA
Country	: USA	Zipcode:	01581 –
Attention	n: Ms Sharon Levesque CPA		

2. Contact				
Nam	ie:	Sharon Levesque	Phone Number:	857–496–1752
	pany:	CapeNet LLC	Fax Number:	037 170 1732
Stre		1 Park Lane, #1122	E-Mail:	slevesque@capenetllc.com
Sire	et.	1 Falk Lalle, #1122	E-Man:	sievesque@capenetiic.com
City	•	Boston	State:	MA
_				
	ntry:	USA	Zipcode:	02210 –
Atte	ntion:	Sharon Levesque	Relationship:	Same
3. Place of Incor	poration	of Applicant Massachusetts		
4. Other Compar	ny(ies) a	nd Place(s) of Incorporation		
	\	11.1		
5. Service Type(s	, ,	c all that apply) Global Facilities—Based Authority (	Section 63 18(e)(1))	
Ш		Global Resale Authority (Section 6		
<u> </u>		• •		
		es-Based Service (Section 63.18(e)(		
<b></b>		ed Resale Service (Section 63.18(e)(	**	
Individual	l Faciliti	es-Based and Resale Service (Section	on 63.18(e)(3))	
Switched	Services	s over Private Lines (ISR) (Section 63	3.16 and/or 63.18 (e)(3))	
Inmarsat a	and Mob	ile Satellite Service (Section 63.18(e	e)(3))	
Overseas	Cable C	onstruction (Section 63.18(e)(3))		
Individual	l Non–Ir	nterconnected Private Line Resale Se	rvice (Section 63.18(e)(3))	
Other (Section 63.18(e)(3))				

	ted with this application? te and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
<del>"</del>	Entity Noncommercial educational licensee
	· ·
Other(please e	explain).
6b. Fee Classificat	ion CUT – Section 214 Authority
7. Destination Cou "Countries X, Y, an	entry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or and Z only".) All International Points
All International P	otion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to coints 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 Resold Services to All International Points
Attachment 1 a sta	ant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in attement 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 11 anough 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**

18. Typed Name of Person Signing (Must be a Corp Sharon Levesque	oorate Officer) 19. Title o CFO	f Person Signing			
(U.S. Code, Title 18, Section 1	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: CapeNet Attachment	2:	3:			

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