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:

214 INTERNATIONAL APPLICATION

| nt | | | |
|-----------------|----------------------------------|---|--|
| Name: | Guilford Communications Inc | Phone Number: | 336–544–4000 x105 |
| DBA Name: | | Fax Number: | 336–790–3250 |
| Street: | 301 S Elm St | E-Mail: | nicky.smith@carolinadigitalphone. |
| | Suite 625 | | |
| City: | Greensboro | State: | NC |
| Country: | USA | Zipcode: | 27401 – 6017 |
| Attention: | JAMES N SMITH JR | | |
| | DBA Name: Street: City: Country: | DBA Name: Street: 301 S Elm St Suite 625 City: Greensboro Country: USA | DBA Name: Street: 301 S Elm St E-Mail: Suite 625 City: Greensboro State: Country: USA Zipcode: |

2. Contact

Name: JAMES N SMITH JR Phone Number: 336–544–4000

Company: GUILFORD Fax Number: 336–790–3250

COMMUNICATIONS INC

Street: 301 S ELM ST **E–Mail:** nicky.smith@carolinadigitalphone.

com

SUITE 625

City: GREENSBORO State: NC

Country: USA **Zipcode:** 27401 – 6017

Attention: JAMES N SMITH JR **Relationship:** Same

3. Place of Incorporation of Applicant NORTH CAROLINA

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? | | | | | |
| If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). | | | | | |
| 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 INTERNATIONAL POINTS | | | | | |

| | on of authority requested, e.g., Application for Authority to Provide International Facilities–Based and Res | old Services to |
|------------------------|--|-----------------|
| | nts Except Country X) | |
| (If the complete de | escription does not appear in this box, please go to the end of the form to view it in its entirety.) | |
| į į | Application for authority to provide resale service in accordance with | |
| | section 63.18(e)(2) of the Commission | |
| | | |
| | | |
| _ | | |
| | | |
| | | |
| | t request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Yes | O No |
| Attachment I a state | ment of how the application qualifies for streamlined processing. | |
| | | |
| 10. If applying for au | athority to provide switched services over private lines pursuant to Section 63.16, provide the required show | ving in |
| Attachment 1. | | _ |
| | | |
| | | |
| Applicant certifies t | hat its responses to questions 11 through 17 are true: | |
| | | |
| 11 If the applicant: | a of familiar position and a officiated (as defined in 47 C.F.D. Section 62 00(a)) with a familiar | |
| | s a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign ttachment 1 the information and certifications required by Section 63.18(i) through (m). | |
| carrier, provide in A | trachinent 1 the information and certifications required by Section 05.18(1) through (iii). | |
| | | |
| | | |
| 12. Does the applica | nt seek authority to provide service to any destination described in paragraphs (1) through (4) Yes | A No |
| | 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 2, 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 | 10 |
| 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 | lo |

CERTIFICATION

| 18. Typed Name of Person Signing (Must be a Corp JAMES N SMITH JR | oorate Officer) | 19. Title of Perso PRESIDENT | on Signing | | | | | |
|---|------------------|---------------------------------|------------|--|--|--|--|--|
| 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: CFR Section 63.12 | 2: C.F.R. Sectio | n 63.18 | 3: | | | | | |

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