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: Kajeet Inc – Application for Global or Limited Global Resale Authority

1. Applicant	1. Applicant					
Na	ame:	kajeet Inc	Phone Number:	240-482-3530		
1	BA ame:		Fax Number:	240–482–3531		
St	reet:	7901 Jones Branch Drive	E-Mail:	msim@kajeet.com		
		Suite 350				
Ci	ity:	McLean	State:	VA		
Co	ountry:	USA	Zipcode:	22102 –		
At	ttention:	Molly C Sim				

2. Contact				
Name:	Patrick D. Crocker	Phone Number:	269-381-8893	
Compan	ny: Crocker & Crocker	Fax Number:	269-381-4855	
Street:	107 W Michigan Ave	E-Mail:	patrick@crockerlawfirm.com	
	4th Floor			
City:	Kalamazoo	State:	MI	
Country	: USA	Zipcode:	49007 –	
Attentio	n: Patrick D. Crocker	Relationship:	Legal Counsel	
3. Place of Incorpora	ntion of Applicant Delaware			
4. Other Company(ie	es) and Place(s) of Incorporation			
5. Service Type(s) (c	heck all that apply)			
• • • • • • • • • • • • • • • • • • • •	nited Global Facilities—Based Aut	hority (Section 63.18(e)(1))		
Global or Lim	nited Global Resale Authority (Se	ection 63.18(e)(2))		
	cilities-Based Service (Section 63	3.18(e)(3))		
Individual Switched Resale Service (Section 63.18(e)(3))				
Individual Fac	cilities-Based and Resale Service	(Section 63.18(e)(3))		
Switched Serv	vices over Private Lines (ISR) (Se	ction 63.16 and/or 63.18 (e)(3))		
Inmarsat and	Mobile Satellite Service (Section	63.18(e)(3))		
Overseas Cab	le Construction (Section 63.18(e)	(3))		
Individual No	Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))			
Other (Section	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).
O Governmental Entity O 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
8. Caption (description of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services All International Points Except Country X) (If the complete 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 global international resale service between the United States and International Points
9. Does the applicant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Attachment 1 a statement 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 required showing in Attachment 1.

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

8. Typed Name of Person Signing (Must be a Daniel J. Neal	Corporate Officer) 19. Tit CEO	19. Title of Person Signing CEO		
(U.S. Code, Title 18, Sect	ion 1001), AND/OR REVOCATI	UNISHABLE BY FINE AND / OR IM ON OF ANY STATION AUTHORIZA EITURE (U.S. Code, Title 47, Section 5	TION	
20. 1: ATTACHMENT 1	2: ATTACHMENT 2	3:		

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