INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Medcom, LLC Application for FCC 214 Authority

1. Applio	cant			
	Name:	Medcom, LLC	Phone Number:	212-495-8642
	DBA Name:		Fax Number:	646-349-1246
	Street:	15 Broad Street Suite 1412	E–Mail:	cab@medcomllc.net
	City:	New York	State:	NY
	Country:	USA	Zipcode:	10005 –
	Attention:	Mr Carlton Barlow		

2. Contact						
	Name:	Alonzo Beyene	Phone Number:	305-468-1645		
	Company:	Regnum Group, Inc.	Fax Number:	305-675-7711		
	Street:	7999 NW 53 Street	E-Mail:	reg@regnumgroup.com		
	City:	Miami	State:	FL		
	Country:	USA	Zipcode:	33166 –		
	Attention:	Regulatory Consultant	Relationship:	Same		
3. Place of	Incorporation	n of Applicant Nevada				
4. Other Co	ompany(ies) a	and Place(s) of Incorporation				
5. Service 7	Type(s) (chec	k all that apply)				
G lob	oal or Limited	d Global Facilities-Based Authority	(Section 63.18(e)(1))			
▼ Glob	oal or Limited	d Global Resale Authority (Section	63.18(e)(2))			
Indiv	Individual Facilities–Based Service (Section 63.18(e)(3))					
Indiv	idual Switch	ed Resale Service (Section 63.18(e	e)(3))			
Indiv	idual Faciliti	ies-Based and Resale Service (Sec	tion 63.18(e)(3))			
Swit	Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))					
Inma	arsat and Mol	bile Satellite Service (Section 63.18	B(e)(3)			
Over	seas Cable C	Construction (Section 63.18(e)(3))				
		nterconnected Private Line Resale	Service (Section 63.18(e)(3))			

	nitted with this application?
~~	blete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
Government	tal Entity Noncommercial educational licensee
Other(please	e explain):
6b. Fee Classific	eation CUT – Section 214 Authority
7. Destination C "Countries X, Y,	ountry(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	ription of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to Points Except Country X) ete 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 Facilities-Based and Resold Services to All International Points.
Attachment 1 a	licant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Statement of how the application qualifies for streamlined processing. For 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	0	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	0	No

CERTIFICATION

18. Typed Name of Person Signing Carlton Barlow		19. Title of Person Signing Vice–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: FCC214App	2:	3:			

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