## INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

## APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: 214A

1. Applicant					
Name:	MTC MATRIXES	Phone Number:	360-459-8264		
DBA Name:		Fax Number:	360-413-5064		
Street:	6807 14th AVE S.E.	E-Mail:	mtcmatrixes@comcast.net		
	BWNGKVN**SNGLP				
City:	Lacey	State:	WA		
Country:	USA	Zipcode:	98503 –		
Attention:	Mr Marcus Tyrone Travenia				

2. Contact				
	Name:	MARCUS TYRONE TRAVENIA	Phone Number:	360-459-8264
	Company:	MTC MATRIXES	Fax Number:	360-413-5064
	Street:	6807 14th AVE S.E.	E-Mail:	mtcmatrixes@comcast.net
		BWNGKVVN**SNGLP		
	City:	Lacey	State:	WA
	<b>Country:</b>	USA	Zipcode:	98503 –
	<b>Attention:</b>	Mr Marcus Tyrone Travenia	Relationship:	Same

3. Place of Incorporation of Applicant STATE OF WASHINGTON
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))

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.	<b>⊘</b> Yes	O 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.	<b>●</b> Yes	O 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.		
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.	•	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	٥	No

## **CERTIFICATION**

18. Typed Name of Person Signing MARCUS TYRONE TRAVENIA		19. Title of Person Signing OWNER 100%		
(U.S. Code, Title 18, Section	1001), AND/OR REVOCATIO	NISHABLE BY FINE AND / OR IMPRISON N OF ANY STATION AUTHORIZATION TURE (U.S. Code, Title 47, Section 503).	NMENT	
20. 1: marcus001	2: marcus	3: marcus		

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