INTERNATIONAL SECTION 214 SPECIAL TEMPORARY AUTHORITY APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu: Application for special temporary authority to offer the Inmarsat BGAN service.

| 1. Applicant | | | |
|--------------|---------------------|---------------|-------------------------|
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| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 – |
| Attention: | Danielle Aguto | | |
| | | | |

| Name: | William K. Coulter | Phone Number: | 202-861-3943 |
|---|--|---|------------------------------|
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| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 – |
| Contact Title: | William K. Coulter | Relationship: | Legal Counsel |
| ther Company(ies) a | | | |
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| TYPE OF REQU | EST | | | |
|----------------------|--|-----------------------|--|-------------------|
| 6. 💿 New Reque | est O Extend STA Date | • Other | 7. Date Authorization Needed: | |
| | | | | |
| | nitted with this application? and attach FCC Form 159. If | No. indicate reason | for fee exemption (see 47 C.F.R.Section 1.1114). | |
| • | Entity Noncommercial edu | | r | |
| Other(please exp | | | | |
| | ecial Temporary Authority Re cription does not appear in this | • | he end of the form to view it in its entirety.) | |
| | Application for spec service. | ial temporary | authority to offer the Inmarsat BGAN | |
| 10. In Attachment 1, | , provide justification of need | for special temporary | y authority requested. | |
| number [e.g., ITC-2 | | IB Submission ID of | any pending applications filed with the Commission, entry f the pending application [e.g., IB200311111] AND go t | |
| Applicant certifies | that its responses to question | ons 11 through 17 a | are true: | |
| | is a foreign carrier, or is affili d certifications required by Sec | | 7 C.F.R. Section 63.09(e)) with a foreign carrier, provide the provider of the | e in Attachment 1 |

| 13. 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. | • Yes | O No |
|---|----------------|-----------------|
| 14. 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. | • Yes | O No |
| 15. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applic direct and indirect shareholders or other equity holders, and identify any interlocking directorates. | ant's ten pero | cent or greater |
| 16. In Attachment 1, respond to paragraphs (d), (e)(3) and (g) of Section 63.18. | | |
| 17. 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 | O No |
| 18. 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 | O No |

CERTIFICATION

| 19. Typed Name of Person Signing Danielle Aguto | | e of Person Signing ized Representative | |
|--|--------------------------------|---|----|
| (U.S. Code, Title 18, Second | ection 1001), AND/OR REVOCATIO | NISHABLE BY FINE AND / OR IMPE ON OF ANY STATION AUTHORIZATIO ITURE (U.S. Code, Title 47, Section 502 | ON |
| 21. 1: Description | 2: COS | 3: | |

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