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:

Vizada, Inc. requests special temporary authority to allow it to provide Inmarsat services via the Inmarsat 4F3 satellite at 97.65 W.L. beginning January 7, 2009.

1. Applicant Vizada, Inc. **Phone Number:** Name: 301-838-7807 **DBA Name:** Fax Number: 301-838-7807 **E-Mail:** Street: 1101 Wootton Parkway robert.swanson@vizada.com 10th Floor City: Rockville State: MD **Country:** USA Zipcode: 20852 _ Mr Robert W Swanson Attention:

| Name: | Robert W. Swanson | Phone Number: | 3018387807 |
|---|--|--|---------------------------|
| Company: | Vizada, Inc. | Fax Number: | 3018387752 |
| Street: | 1101 Wootton Parkway | E-Mail: | robert.swanson@vizada.com |
| | 10th Floor | | |
| City: | Rockville | State: | MD |
| Country: | USA | Zipcode: | 20852 – |
| Contact Title: | Robert W. Swanson | Relationship: | Legal Counsel |
| ther Company(ies) an rvice Type(s) (check | | (Saction 62, 18(a)(1)) | |
| ther Company(ies) an rvice Type(s) (check Global or Limited Glo | all that apply) obal Facilities–Based Authority | | |
| ther Company(ies) an rvice Type(s) (check Global or Limited Glo Global or Limited Glo | all that apply) obal Facilities–Based Authority obal Resale Authority (Section | 63.18(e)(2)) | |
| ther Company(ies) an rvice Type(s) (check Global or Limited Glo Global or Limited Glo ndividual Facilities— | all that apply) obal Facilities–Based Authority obal Resale Authority (Section Based Service (Section 63.18(e | e)(3)) | |
| ther Company(ies) an rvice Type(s) (check Global or Limited Glo Global or Limited Glo ndividual Facilities— ndividual Switched H | nd Place(s) of Incorporation all that apply) obal Facilities–Based Authority obal Resale Authority (Section Based Service (Section 63.18(e Resale Service (Section 63.18(e | e)(3)) | |
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| TYPE OF REQU | JEST | | | | | | | |
|--|--|------------------------|--|-------------------|--|--|--|--|
| 6. 💿 New Requ | uest O Extend STA Date | O Other | 7. Date Authorization Needed:01/07/2009 | | | | | |
| | | | | | | | | |
| 8. Is a fee sul | bmitted with this application? | | | | | | | |
| If Yes, comple | te and attach FCC Form 159. I | If No, indicate reason | for fee exemption (see 47 C.F.R.Section 1.1114). | | | | | |
| Governmental | Entity Noncommercial ed | ucational licensee | | | | | | |
| Other(please e | xplain): | | | | | | | |
| | pecial Temporary Authority R escription does not appear in th | | he end of the form to view it in its entirety.) | | | | | |
| Vizada, Inc. requests special temporary authority to allow it to | | | | | | | | |
| provide Inmarsat services via the Inmarsat 4F3 satellite at 97.65 W.L. | | | | | | | | |
| | beginning January 7, 2009. | | | | | | | |
| | | | | | | | | |
| 10. In Attachment | 1, provide justification of need | 1 for special temporar | y authority requested. | | | | | |
| | | | | | | | | |
| | | | any pending applications filed with the Commission, end | | | | | |
| | MD2009010200001 or Subm | | f the pending application [e.g., IB200311111] AND go | to question 16.) | | | | |
| Applicant certifie | es that its responses to quest | ions 11 through 17 | are true: | | | | | |
| | | | | | | | | |
| | nt is a foreign carrier, or is affind certifications required by S | | 7 C.F.R. Section $63.09(e)$) with a foreign carrier, provid | e in Attachment 1 | | | | |
| | in certifications required by S | ection 03.16(1) intoug | çii (iii <i>)</i> . | | | | | |

| 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. | O Yes | ● 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. | O Yes | lo 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 per | 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 Robert W. Swanson | | 20. Title of Person Signing Associate Counsel | | |
|---|----|--|--|--|
| 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). | | | | |
| 21. 1: 4F3 214 STA–Attach1 | 2: | 3: | | |

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