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File Number: SAT-STA-20070828-00117

Callsign:

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

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APPLICANT INFORMATION

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

Extension of Special Temporary Authority to Operate a Substitute Low Power Repeater in Miami, Florida

1. Applicant

Name:	XM Radio Inc.	Phone Number:	202-380-4000
DBA Name:		Fax Number:	202-380-4500
Street:	1500 Eckington Place, NE	E-Mail:	james.blitz@xmradio.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20002 -
Attention:	James S. Blitz		

2. Contact	
Name: James S. Blitz	Phone Number: 202-380-4000
Company: XM Satellite Radio Inc.	Fax Number: 202-380-4500
Street: 1500 Eckington Place NE	E-Mail: james.blitz@xmradio.com
City: Washington	State: DC
Country: USA	Zipcode: 20002 -
Attention:	Relationship: Same
(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)	
3. Reference File Number or Submission ID	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).	
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee	
<input type="radio"/> Other (please explain):	
4b. Fee Classification CRY – Space Station (Geostationary)	
5. Type Request	
<input type="radio"/> Change Station Location <input type="radio"/> Extend Expiration Date <input checked="" type="radio"/> Other	
6. Temporary Orbit Location	7. Requested Extended Expiration Date

8. Description (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

XM Radio Inc. (XM) requests extension of its special temporary authority (STA) to continue to operate a substitute low power terrestrial repeater (less than 2 kW EIRP) in Miami, Florida.

9. 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 No

10. Name of Person Signing
James S. Blitz

11. Title of Person Signing
Vice President, Regulatory Counsel

12. Please supply any need attachments.

Attachment 1: STA Request

Attachment 2:

Attachment 3:

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).

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