

Date & Time Filed: Jul 31 2013 2:29:35:423PM

File Number: SAT-STA-20130731-00101

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:

SAT-MOD-STA-S2369

1. Applicant

| | | | |
|-------------------|-------------------------------------|----------------------|-------------------------|
| Name: | DIRECTV Enterprises, LLC | Phone Number: | 301-663-0053 |
| DBA Name: | | Fax Number: | 240-358-0569 |
| Street: | 2230 E. Imperial Hwy CA/LAI/N340 | E-Mail: | jwengryniuk@directv.com |
| City: | El Segundo | State: | CA |
| Country: | USA | Zipcode: | 90245 - |
| Attention: | Mr Jack M Wengryniuk | | |

2. Contact

| | | | |
|-------------------|-------------------------|----------------------|---------------------------------|
| Name: | William M. Wiltshire | Phone Number: | 202-730-1350 |
| Company: | Wiltshire & Grannis LLP | Fax Number: | 202-730-1301 |
| Street: | 1200 18th Street, NW | E-Mail: | wwiltshire@wiltshiregrannis.com |
| | Suite 1200 | | |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 - |
| Attention: | William M. Wiltshire | Relationship: | Legal Counsel |

(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 SATMOD2013073000098 or Submission ID

4a. Is a fee submitted with this application?

- If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).
- Governmental Entity Noncommercial educational licensee
- Other (please explain):

4b. Fee Classification CRY – Space Station (Geostationary)

5. Type Request

- Change Station Location Extend Expiration Date Other

6. Temporary Orbit Location
55.8 E.L.

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.)

See Attached Narrative

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
Romulo Pontual

11. Title of Person Signing
Executive Vice President

12. Please supply any need attachments.

Attachment 1: Narrative

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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