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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:

S2844 – June20 STA Renewal

1. Applicant

Name: EchoStar BSS Corporation Phone Number: 202–463–3709

DBA Name: Fax Number:

Street: 1110 Vermont Ave NW E–Mail: Alison.Minea@dish.com

Suite 750

City: Washington State: DC

Country: USA Zipcode: 20005 -

Attention: Alison Minea

2. Contact	t						
	Name:	EchoStar BSS Corporation	Phone No	umber:	202-463-3709		
	Company:		Fax Num	ber:			
	Street:	1110 Vermont Ave NW	E-Mail:		Alison.Minea@dish.com		
		Suite 750					
	City:	Washington	State:		DC		
	Country:	USA	Zipcode:		20005 –		
	Attention:		Relations	ship:			
(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 SATSTA2019121300147 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 Cl	lassification	CRY – Space Station (Geostations	ary)				
5. Type Request Change Station Location Extend Expiration Date Other							
<u> </u>				1 ^	Requested Extended Expiration Date 2021–01–18 00:00:00.0		

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.)								
	f special temporary authorit orbital location. See attach		oStar 16 on channels 1 and 2					
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.								
10. Name of Person Signing		11. Title of Person Signing						
Alison Minea		Director & Senior Counsel, Regulatory Affairs						
12. Please supply any need attachments.								
Attachment 1: Exhibit 1	Attachment 1: Exhibit 1 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. Co	de, Title 47, Section 312(a)(1)), AND/OF	R FORFEITURE (U.S. Co	ode, Title 47, Section 503).					

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