# CABLE LANDING LICENSE APPLICATION FOR OFFICIAL USE ONLY

#### APPLICANT INFORMATION

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

Triton Telecom Inc. – Cable Landing License Application

cant					
Name:	Triton Telecom Inc.	Phone Number:	407-447-1140		
DBA Name:		Fax Number:	407–447–1184		
Street:	5728 Major Boulevard	E-Mail:	joanne.negron@cobian-etc.com		
	Suite 307				
City:	Orlando	State:	FL		
Country:	USA	Zipcode:	32819 –		
Attention:	Joanne J Negron				

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7.	Contact	ľ

Name: Jonathan S. Marashlian Phone Number: 703–714–1313

Company: Helein & Marashlian, LLC Fax Number: 703–714–1330

Street: 1483 Chain Bridge Road E-Mail: jsm@commlawgroup.com

Suite 301

City: McLean State: VA

Country: USA Zipcode: 22101 -

Attention: Jonathan S. Marashlian Relationship: Legal Counsel

### 3. Place of Incorporation of Applicant Florida

4. Other Company(ies) and Place(s) of Incorporation

- **5. Destination Country(ies)** United States
- 6. Caption (description of authority requested, e.g., Application for a License to Land and Operate a Fiber Optic Submarine Cable System between the United States, Country A and Country B.)

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

Application for a License to Land and Operate a Fiber Optic Submarine Cable System within the United States.

7. 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):									
8. Will the cable system be operated on a common of	carrier basis?   Ye	s O No							
If yes, provide the File NumberSEE APPLICATION of the associated Section 214 application for the construction and operation of new facilities.									
9. In Attachment 1, provide the information and cer	tifications required by	47 C.F.R. Section 1.767(	a).						
CERTIFICATIONS									
10. By checking Yes, the undersigned certifies that to a denial of Federal benefits that includes FCC be 21 U.S.C. Section 862, because of a conviction for 1.2002(b) for the meaning of "party to the app	nefits pursuant to Sec possession or distribu	tion 5301 of the Anti–Drution of a controlled substa	g Act of 1988,	● Yes <b>○</b> No					
11. Typed Name of Person Signing		12. Title of Person Signing							
Joanne Negron		CEO							
		<u>I</u>							
WILLFUL FALSE STATEMENTS MAI (U.S. Code, Title 18, Section 1 (U.S. Code, Title 47, Section	1001), AND/OR REV	OCATION OF ANY STA	ΓΙΟΝ AUTHORIZ	ATION					
13. 1: Attachment 1	2:	3:							

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