Date & Time Filed: Jun 25 2021 1:19:45:780PM File Number: SES-LIC-INTR2021-02306

Callsign/Satellite ID:

APPLICATION FOR EARTH STATION AUTHORIZATIONS FCC Use Only FCC 312 MAIN FORM

FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

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

License for a 1.5 meter Ku-band transmit/receive earth station in Tampa, Florida

| 1–8. Legal Name of Applicant | 1-8. | Legal | Name | of Applicant |
|------------------------------|------|-------|------|--------------|
|------------------------------|------|-------|------|--------------|

Name: Ovzon LLC Phone Number: 703–276–3333

DBA Fax Number:

Name:

Street: 13461 Sunrise Valley Drive E–Mail: pek@ovzon.com

Suite 100

City: Herndon State: VA

Country: USA Zipcode: 20171 -

Attention: Paul Ekberg

9–16. Name of Contact Representative

Name: Mark Barnum Phone Number: 703–276–3333

Company: Ovzon LLC Fax Number:

Street: 5460 Beaumont Center Blvd E–Mail: mba@ovzon.com

City: Tampa State: FL

Country: USA **Zipcode:** 33634–5295

Attention: Relationship:

CLASSIFICATION OF FILING

| 17. Choose the button next to the | b. |
|--|--|
| classification that applies to this filing for | b1. Application for License of New Station |
| both questions a. and b. Choose only one | b2. Application for Registration of New Domestic Receive–Only Station |
| for 17a and only one for 17b. | |
| | (N/A) b3. Amendment to a Pending Application (N/A) b4. Modification of License or Registration |
| a. | (N/A) b5. Assignment of License or Registration |
| a1. Earth Station | (N/A) b6. Transfer of Control of License or Registration |
| (N/A) a2. Space Station | (N/A) b7. Notification of Minor Modification |
| | (N/A) b8. Application for License of New Receive-Only Station Using Non-U.S. Licensed |
| | Satellite |
| | (N/A) b9. Letter of Intent to Use Non–U.S. Licensed Satellite to Provide Service in the United |
| | States h 10. Other (Please specify) |
| | o b10. Other (Please specify) |
| | ▶ b11. Application for Earth Station to Access a Non–U.S.satellite Not Currently Authorized to |
| | Provide the Proposed Service in the Proposed Frequencies in the United States. |
| | |
| | (N/A) b13. Amendment to a Pending Database Entry Application |
| | (N/A) b14. Modifiction of Database Entry |
| 17c. Is a fee submitted with this applicati | on? |
| 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 Noncomme | ercial educational licensee |
| Other(please explain): | |
| 17d. | |
| | |
| Fee Classification BAX – Fixed Satellite T | ransmit/Receive Earth |
| Station | |
| | |
| | |

| 18. If this filing is in reference to an | 19. If this filing is an amendment to a pending application enter: | | | | |
|---|--|---|--|--|--|
| existing station, enter: (a) Call sign of station: | (a) Date pending application was filed: | (b) File number of pending application: | | | |
| Not Applicable | Not Applicable | Not Applicable | | | |
| | | | | | |

TYPE OF SERVICE

| I YPE OF SERVICE | | | | | | |
|---|---|--|--|--|--|--|
| 20. NATURE OF SERVICE: This filing is for an authorization to provide | or use the following type(s) of service(s): Select all that apply: | | | | | |
| a. Fixed Satellite b. Mobile Satellite c. Radiodetermination Satellite | | | | | | |
| d. Earth Exploration Satellite | d. Earth Exploration Satellite | | | | | |
| e. Direct to Home Fixed Satellite | | | | | | |
| f. Digital Audio Radio Service | | | | | | |
| g. Other (please specify) | | | | | | |
| 21. STATUS: Choose the button next to the applicable status. Choose only one. Common Carrier Non–Common Carrier | 22. If earth station applicant, check all that apply. Using U.S. licensed satellites Using Non–U.S. licensed satellites | | | | | |
| 23. If applicant is providing INTERNATIONAL COMMON CARRIER so facilities: Connected to a Public Switched Network Not connected to | ervice, see instructions regarding Sec. 214 filings. Choose one. Are these to a Public Switched Network N/A | | | | | |

| 24. FREQUENCY BAND(S): Place an "X" in the box(es) next to all applicable frequency band(s). |
|--|
| a. C–Band (4/6 GHz) b. Ku–Band (12/14 GHz) |
| c.Other (Please specify upper and lower frequencies in MHz.) |
| Frequency Lower: 10790 Frequency Upper: 13160 |
| |
| TYPE OF STATION |
| 25. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one. |
| a. Fixed Earth Station |
| b. Temporary–Fixed Earth Station |
| c. 12/14 GHz VSAT Network |
| d. Mobile Earth Station |
| (N/A) e. Geostationary Space Station |
| (N/A) f. Non-Geostationary Space Station |
| g. Other (please specify) |
| |
| 26. TYPE OF EARTH STATION FACILITY: Choose only one. |
| Transmit/Receive Transmit-Only Receive-Only N/A |
| |
| PURPOSE OF MODIFICATION |
| TURI OSE OF MODIFICATION |
| |
| 27. The purpose of this proposed modification is to: (Place an 'X' in the box(es) next to all that apply.) |
| |
| Not Applicable |
| |

ENVIRONMENTAL POLICY

| 28. Would a Commission grant of any proposal in this application or amendment have a significant environmental impact as defined by 47 CFR 1.1307? If YES, submit the statement as required by Sections 1.1308 and 1.1311 of the Commission's rules, 47 C.F.R. §§ 1.1308 and 1.1311, as an exhibit to this application. A Radiation Hazard Study must accompany all applications for new transmitting facilities, major modifications, or major amendments. | Yes No Exhibit B |
|---|--------------------|
| ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aeronautical fixed radio station services are not required to respond to Items 30–34. | utical en route or |
| 29. Is the applicant a foreign government or the representative of any foreign government? | O Yes O No |
| 30. Is the applicant an alien or the representative of an alien? | Yes No N/A |
| 31. Is the applicant a corporation organized under the laws of any foreign government? | O Yes O No N/A |
| 32. Is the applicant a corporation of which more than one–fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country? | Yes No N/A |

| 33. Is the applicant a corporation directly or indirectly controlled by any other corporation of which more than one–fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country? | ● Yes ● No | O N/A |
|--|------------|-------|
| 34. If any answer to questions 29, 30, 31, 32 and/or 33 is Yes, attach as an exhibit an identification of the aliens or foreign entities, their nationality, their relationship to the applicant, and the percentage of stock they own or vote. | Exhibit D | |
| BASIC QUALIFICATIONS | | |
| 35. Does the Applicant request any waivers or exemptions from any of the Commission's Rules? If Yes, attach as an exhibit, copies of the requests for waivers or exceptions with supporting documents. | Yes | O No |
| | Exhibit C | |
| 36. Has the applicant or any party to this application or amendment had any FCC station authorization or license revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission? If Yes, attach as an exhibit, an explination of circumstances. | O Yes | No |

| 37. Has the applicant, or any party to this application or amendment, or any party directly or indirectly controlling the applicant ever been convicted of a felony by any state or federal court? If Yes, attach as an exhibit, an explination of circumstances. | O Yes | ⊚ No |
|--|-------|-------------|
| 38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applicant, guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement or any other means or unfair methods of competition? If Yes, attach as an exhibit, an explanation of circumstances | O Yes | ⊚ No |
| 39. Is the applicant, or any person directly or indirectly controlling the applicant, currently a party in any pending matter referred to in the preceding two items? If yes, attach as an exhinit, an explanation of the circumstances. | O Yes | ⊘ No |
| 40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the names, address, and citizenship of those stockholders owning a record and/or voting 10 percent or more of the Filer's voting stock and the percentages so held. In the case of fiduciary control, indicate the beneficiary(ies) or class of beneficiaries. Also list the names and addresses of the officers and directors of the Filer. | | |

| 41. 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 |
|--|----------------|--------------|
| 42a. Does the applicant intend to use a non–U.S. licensed satellite to provide service in the United States? If Yes, answer 42b and attach an exhibit providing the information specified in 47 C.F.R. 25.137, as appropriate. If No, proceed to question 43. | Yes | O No |
| 42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued, v coordinated or is in the process of coordinating the space station? Brazil | vhat administr | ration has |
| 43. Description. (Summarize the nature of the application and the services to be provided). (If the onot appear in this box, please go to the end of the form to view it in its entirety.) | complete desc | ription does |
| License for a 1.5 meter Ku-band earth station that supports the pending STA filed under FCC Submission ID | applicati | lon |

| 43a. Geographic Service Rule Certification By selecting A, the undersigned certifies that the applicant is not subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25. | ● A |
|--|------------|
| By selecting B, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will comply with such requirements. | O B |
| By selecting C, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will not comply with such requirements because it is not feasible as a technical matter to do so, or that, while technically feasible, such services would require so many compromises in satellite design and operation as to make it economically unreasonable. A narrative description and technical analysis demonstrating this claim are attached. | o c |

CERTIFICATION

The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. The applicant certifies that grant of this application would not cause the applicant to be in violation of the spectrum aggregation limit in 47 CFR Part 20. All statements made in exhibits are a material part hereof and are incorporated herein as if set out in full in this application. The undersigned, individually and for the applicant, hereby certifies that all statements made in this application and in all attached exhibits are true, complete and correct to the best of his or her knowledge and belief, and are made in good faith.

| Individual | | | |
|---|--|-----------------------------|--|
| Unincorporated Association | | | |
| Partnership | | | |
| Corporation | | | |
| Governmental Entity | | | |
| Other (please specify) | | | |
| LLC | | | |
| | | | |
| | | | |
| 45. Name of Person Signing | | 46. Title of Person Signing | |
| Tom Hopkins | | Chief Operating Officer | |
| Iom Hopkins | | | |
| Tom Hopkins | | | |
| | nents. | | |
| 47. Please supply any need attachm Attachment 1: | nents. Attachment 2: | Attachment 3: | |
| 47. Please supply any need attachm | | | |
| 47. Please supply any need attachm | | | |
| 47. Please supply any need attachm Attachment 1: WILLFUL FALSE STA | Attachment 2: TEMENTS MADE ON THIS FO | | |

SATELLITE EARTH STATION AUTHORIZATIONS FCC Form 312 – Schedule B:(Technical and Operational Description) FOR OFFICIAL USE ONLY

Location of Earth Station Site

E1: Site Identifier: Tampa E5. Call Sign:

E2: Contact Name Mark Barnum E6. Phone 7032763333

Number:

E3. Street: 5460 Beaumont E7. City: Tampa

Center Blvd

E8. County: Hillsborough

E4. State FL E9. Zip Code 33634

E10. Area of Operation: Florida

E11. Latitude: 27 °59 '59.3 "N

E12. Longitude: 82 °32 '54.9 "W

E13. Lat/Lon Coordinates are: NAD-27 NAD-83 N/A

E14. Site Elevation (AMSL): 4.73 meters

| E15. If the proposed antenna(s) operate in the Fixed Satellite Service (FSS) with geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a) and (b) as demonstrated by the manufacturer's qualification measurement? If NO, provide as a technical analysis showing compliance with two–degree spacing policy. | ● Y | es . | O No | С | N/A |
|--|------------|------|------|------|------------------|
| E16. If the proposed antenna(s) do not operate in the Fixed Satellite Service (FSS), or if they operate in the Fixed Satellite Service (FSS) with non–geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a2) and (b) as demonstrated by the manufacturer's qualification measurements? | OA | es . | O No | € | ₎ N/A |
| E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point. | 0 | Yes | • |) No | 0 |
| | | | | | |
| E18. Is frequency coordination required? If YES, attach a frequency coordination report as | ● ' | Yes | c | No | 0 |
| E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as | 0 | Yes | • | , No | 0 |
| E20. FAA Notification – (See 47 CFR Part 17 and 47 CFR part 25.113(c)) Where FAA notification is required, have you attached a copy of a completed FCC Form 854 and or the FAA's study regarding the potential hazard of the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION. | | Yes | • | N | 0 |
| DOINTS OF COMMINICATION | | | | | |

POINTS OF COMMUNICATION

Satellite Name: AMAZONAS 2 (S2793) | AMAZONAS 2 (S2793) | 61 W.L. If you selected OTHER, please enter the following:

| E21. Common Name: | E22. ITU Name: |
|--|----------------|
| E23. Orbit Location: | E24. Country: |
| POINTS OF COMMUNICATION (Destination Points) | |
| E25. Site Identifier: | |
| E26. Common Name: | E27. Country: |
| 1.3 700003 73 74 | • |

ANTENNA

| Site ID | E28. Antenna Id | E29. Quantity | E30. Manufacturer | | E32. Antenna Size <meters></meters> | E41/42. Antenna GainTransmint and/or Recieve (dBi atGHz) |
|---------|-----------------|---------------|----------------------|------------|--|--|
| Tampa | 1.5m | 1 | SWE-Dish | FA150K EDF | 1.5 | 43.0 dBi at 11.0 |
| | | | | | | 45.0 dBi at 13.0 |

| E28. Antenna Id | E33/34. Diameter Minor/Major (meters) | E35. Above Ground Level (meters) | (meters) | Height Above Ground | Input Power at antenna flange | Maximum Antenna Height | E40. Total EIRP for al carriers (dBW) |
|--------------------|--|---|----------|------------------------|-----------------------------------|---------------------------|--|
| 1.5m | 0.0/0.0 | 7.59 | 12.32 | 6.09 | 43.65 | 1.5 | 61.4 |

FREQUENCY

| E28. Antenna Id | E43/44. | E45. T/R Mode | E46. Antenna | E47. Emission | E48. Maximum | E49. Maximum |
|-----------------|-----------------|---------------|-----------------------|---------------|------------------|------------------|
| | Frequency Bands | | Polarization(H,V, | Designator | EIRP per Carrier | ERIP Density per |
| | (MHz) | | L , R) | | (dBW) | Carrier |
| | | | | | | (dBW/4kHz) |

| 10790 10826 | R | Linear and Circular | 18M0G7D | 0.0 | 0.0 |
|--|--|---|--|--|---|
| and Services (If the | he complete descript | tion does not appear in | this box, please | go to the end of t | he form to view it in its |
| ta carrier | | | | | |
| 11204 11240 | R | Linear and Circular | 18M0G7D | 0.0 | 0.0 |
| ta carrier | | | | | |
| 11324 11360 | R | Linear and Circular | 18M0G7D | 0.0 | 0.0 |
| and Services (If the state of t | he complete descript | tion does not appear in | this box, please g | go to the end of the | he form to view it in its |
| | and Services (If the tall carrier land services (If | and Services (If the complete description of the complete | and Services (If the complete description does not appear in ta carrier 11204 | and Services (If the complete description does not appear in this box, please state carrier 11204 | and Services (If the complete description does not appear in this box, please go to the end of to talk carrier 11204 |

| 1.5m | 12840 12876 | Т | Linear and Circular | 18M0G7D | 61.4 | 24.9 |
|----------------------------|-----------------|---------------------|--------------------------------|------------------|----------------------|---------------------------|
| E50. Modulation entirety.) | on and Services | (If the complete of | lescription does not appear in | this box, please | go to the end of the | he form to view it in its |
| Digital I | Data carrier | | | | | |
| 1.5m | 13004 13040 | Т | Linear and Circular | 18M0G7D | 61.4 | 24.9 |
| Digital I | Data carrier | | | | | |
| 1.5m | 13124 13160 | Т | Linear and Circular | 18M0G7D | 61.4 | 24.9 |
| E50. Modulation | on and Services | (If the complete of | lescription does not appear in | this box, please | go to the end of the | he form to view it in its |
| Digital I | Data carrier | | | | | |

FREQUENCY COORDINATION

| E28. Antenna Id | E51. Satellite Orbit Type | E52/53. Frequency Limits(MHz) | E54/55. Range of Satellite Arc E/W Limit | E56. Earth Station Azimuth Angle Eastern Limit | E57. Antenna Elevation Angle Eastern Limit | E58. Earth Station Azimuth Angle Western Limit | E59. Antenna Elevation Angle Western Limit | E60. Maximum EIRP Density toward the Horizon (dBW/4kHz) |
|--------------------|------------------------------|-------------------------------------|---|--|--|---|--|---|
| 1.5m | Geostationary | 10790 10826 | 61.0/ 61.0 | 139.9 | 49.6 | 139.9 | 49.6 | 0.0 |
| | Geostationary | 11204 11240 | 61.0/ 61.0 | 139.9 | 49.6 | 139.9 | 49.6 | 0.0 |
| | Geostationary | 11324 11360 | 61.0/ 61.0 | 139.9 | 49.6 | 139.9 | 49.6 | 0.0 |
| | Geostationary | 12840 12876 | 61.0/ 61.0 | 139.9 | 49.6 | 139.9 | 49.6 | -30.1 |
| | Geostationary | 13004 13040 | 61.0/61.0 | 139.9 | 49.6 | 139.9 | 49.6 | -30.1 |
| | Geostationary | 13124 13160 | 61.0/61.0 | 139.9 | 49.6 | 139.9 | 49.6 | -30.1 |

REMOTE CONTROL POINT LOCATION

| E61. Call Sign | E65. Phone Number | | | |
|---|-------------------|--|--------------------------|---------------|
| NOTE: Please enter the callsign of the contro callsign for which this application is being filed. | | | | |
| E62. Street Address | | | | |
| | | | | |
| E63. City | E67. County | | E64/68. State/Country | E66. Zip Code |

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