APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Application for Renewal of Special Temporary Authority Granted in SES-STA-20051216-01764 (E010050) for an Additional 60 days

olicant					
Name:	Stratos Communications, Inc.	Phone Number:	301-214-8800		
DBA Name:		Fax Number:	301-214-8801	301-214-8801	
Street:	6901 Rockledge Drive Suite 900	E–Mail:			
City:	Bethesda	State:	MD		
Country:	USA	Zipcode:	20817 –		
Attention:					

2. Contact							
Nar	me:	Alfred Mamlet	Phone Nun	ber: 202–4	202-429-6205		
Cor	mpany:	Steptoe & Johnson LLP	Fax Numb	r: 202–4	202-429-3902		
Str	eet:	1330 Connecticut Ave. N.W.	E–Mail:	amam	ılet@steptoe.com		
City	y:	Washington	State:	DC			
Cou	untry:	USA	Zipcode:	20036	5 –1795		
Atte	ention:		Relationsh	p: Lega	l Counsel		
application. Ple 3. Reference F 4a. Is a fee s If Yes, com Government Other(plea	ease enter of the Number submitted inplete and intal Entity se explain	only one.) or SESSTA2005121601764 or Something application? attach FCC Form 159. If No, in Noncommercial education i:	ubmission ID ndicate reason for the second		the IB Submission ID of the related Section 1.1114).		
4b. Fee Classif	4b. Fee Classification CGB – Mobile Satellite Earth Stations						
5. Type Request O Use Prior to Grant O Change Station Location O Other							
6. Requested U	Jse Prior D	ate					
7. City				8. Latitude (dd mm ss.s h) 0 0 0.0			

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0						
11. Please supply any need attachments.							
Attachment 1: STA Description Attachment 2: Cert. of	Service Attachment 3:						
12. 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.)							
This is an application to renew the special temporary authority granted in SES-STA-20051216-01764 for an additional 60 days. This will allow Stratos to continue to provide the Inmarsat C service in conjuction with the Inmarsat 4F2 satellite.							
13. 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.							
14. Name of Person Signing Paul Kugelman	15. Title of Person Signing Assistant Secretary						
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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