## 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 requested in SES–STA–20080312–00292 (E010050) for an Additional 60 days.

| Name:     | Stratos Communications, Inc. | Phone Number: | 301-214-8800 |
|-----------|------------------------------|---------------|--------------|
| DBA Name: | :                            | Fax Number:   | 301-214-8801 |
| Street:   | 6550 Rock Spring Drive       | E-Mail:       |              |
|           | Suite 650                    |               |              |
| City:     | Bethesda                     | State:        | MD           |
| Country:  | USA                          | Zipcode:      | 20817 –      |

| 2. Contact  |             |                            |            |                                       |                     |  |  |
|---|-------------|----------------------------|------------|---------------------------------------|---------------------|--|--|
| Nai   | me:         | Alfred Mamlet              | Phone Nu   | mber:                                 | 202-429-6205        |  |  |
| Cor   | mpany:      |                            | Fax Numb   | er:                                   | 202-429-3902        |  |  |
| Str   | eet:        | 1330 Connecticut Ave. N.W. | E-Mail:    |                                       | amamlet@steptoe.com |  |  |
|   |             |                            |            |                                       |                     |  |  |
| Cit   | y:          | Washington                 | State:     |                                       | DC                  |  |  |
| Co  | untry:      | USA                        | Zipcode:   |                                       | 20036 -1795         |  |  |
| Att   | ention:     |                            | Relationsl | ip:                                   | Legal Counsel       |  |  |
|   |             |                            |            |                                       |                     |  |  |
| <ul><li>(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.)</li><li>3. Reference File Number SESMFS2005112201615 or Submission ID</li></ul> |             |                            |            |                                       |                     |  |  |
| 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 CGB – Mobile Satellite Earth Stations  |             |                            |            |                                       |                     |  |  |
| 5. Type Request   |             |                            |            |                                       |                     |  |  |
| Use Prior to Grant O Change Station Location Other  |             |                            |            |                                       |                     |  |  |
| 6. Requested U  | Jse Prior E | Date                       |            |                                       |                     |  |  |
| 7. City   |             |                            |            | 8. Latitude<br>(dd mm ss.s h) 0 0 0.0 |                     |  |  |

| 9. State   | 10. Longitude<br>(dd mm ss.s h) 0 0 0.0                         |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| 11. Please supply any need attachments.  |   |  |  |  |  |  |  |
| Attachment 1: E010050 STA RenewalAttachment 2:   | 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 requested in SES-<br>STA-20080312-00292(originally granted in SES-STA-20051216-01764) for an additional 60<br>days. This will allow Stratos to continue to provide the Inmarsat C service in conjunction<br>with the Inmarsat 4F2 satellite.   |   |  |  |  |  |  |  |
| 13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is<br>subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act<br>of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.<br>See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes. |   |  |  |  |  |  |  |
| 14. Name of Person Signing<br>Bruce Henoch   | 15. Title of Person Signing<br>VP, Legal and Regulatory Affairs |  |  |  |  |  |  |
| WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT<br>(U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION<br>(U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).  |   |  |  |  |  |  |  |

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