

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
EMC STA request for new remote control point – E000128

1. Applicant

Name:	Emerging Markets Communications, Inc.	Phone Number:	305-539-1358
DBA Name:		Fax Number:	786-425-0679
Street:	799 Brickell Plaza Suite 804 8th Floor	E-Mail:	vchristin@emc-corp.net
City:	Miami	State:	FL
Country:	USA	Zipcode:	33131 -
Attention:	Virginia Christin		

2. Contact

Name:	Joan M. Griffin	Phone Number:	202-342-8573
Company:	Kelley Drye & Warren LLP	Fax Number:	202-342-8451
Street:	3050 K Street NW Suite 400	E-Mail:	jgriffin@kelleydrye.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20007 -
Attention:		Relationship:	Legal Counsel

(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 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 Classification CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

Use Prior to Grant

Change Station Location

Other

6. Requested Use Prior Date

7. City Kapolei

8. Latitude

(dd mm ss.s h) 21 20 11.3 N

9. State HI	10. Longitude (dd mm ss.s h) 158 5 20.6 W
11. Please supply any need attachments. Attachment 1: STA request + Sch B Attachment 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.) <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">EMC requests an STA for 60 days to change the remote control point for this station (E000128) as of the date the license for this station is assigned from Telesat to EMC.</div>	
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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Virginia Christin	15. Title of Person Signing International and Regulatory Affairs Manager
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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