APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: T-11N STA

1. Applicant			
Name:	VSAT Systems, LLC	Phone Number:	330–785–2100 x104
DBA Name:	:	Fax Number:	419-818-1978
Street:	1520 South Arlington Street	E-Mail:	mike@satventuresmanagement. com
City:	Akron	State:	ОН
Country:	USA	Zipcode:	44306 –
Attention:	Michael Kister		

2. Contact				
Name:	Donna Balaguer	Phone Number:	202-626-7709	
Compa	ny: Fish & Richardson P.C.	Fax Number:	202-783-2331	
Street:	1425 K Street NW	E–Mail:	balaguer@fr.com	
	11th Floor			
City:	Washington	State:	DC	
Countr	y: USA	Zipcode:	20005 –	
Attenti	on:	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 IB2010001580 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 Other(please explain): 				
4b. Fee Classificati	on CGV – Fixed Satellite VSA	AT System		
5. Type Request • Use Prior to Grant • Change Station Location • Other				
6. Requested Use F	Prior Date			
7. CityAkron		8. Latitude (dd mm ss.s h)	41 1 51.5 N	

9. State OH	10. Longitude (dd mm ss.s h) 81 29 33.7 W				
11. Please supply any need attachments.					
Attachment 1: Explanation of STA Attachment 2: Modific	ation App 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 STA request seeks to add operations on Telstar 11N and make related modifications, and add emissions designators. 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 & quot; party to the application& quot; for these purposes.					
14. Name of Person Signing Mike Kister	15. Title of Person Signing President				
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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