

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
O3b STA for CODA Lab II – 60 days (Dec 2014)

1. Applicant

| | | | |
|-------------------|---------------------------|----------------------|--------------------------------|
| Name: | O3b Limited | Phone Number: | 202-813-4026 |
| DBA Name: | | Fax Number: | |
| Street: | 900 17th Street, NW, #300 | E-Mail: | suzanne.malloy@o3bnetworks.com |
| City: | Washington | State: | |
| Country: | USA | Zipcode: | - |
| Attention: | Ms Suzanne Malloy | | |

2. Contact

| | | | |
|-------------------|--|----------------------|------------------|
| Name: | Joseph A. Godles | Phone Number: | 202-429-4900 |
| Company: | Goldberg Godles Wiener & Wright LLP | Fax Number: | 202-429-4912 |
| Street: | 1229 19th St., NW | E-Mail: | jgodles@g2w2.com |
| City: | Washington | State: | DC |
| Country: | USA | Zipcode: | 20036 -2413 |
| 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 SESSTA2014102200816 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
01/09/2015

| | |
|--|---|
| 7. CitySan Diego | 8. Latitude (dd mm ss.s h) 32 40 53.8 N |
| 9. State CA | 10. Longitude (dd mm ss.s h) 117 6 58.3 W |
| 11. Please supply any need attachments. Attachment 1: STA extension 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;">Applicant herein seeks authority to continue the operation of an earth station to be located at the U.S. Navy SPAWAR/CODA Lab at the U.S. Navy Base in San Diego (CODA II Earth Station) that will communicate with the satellite system operated by O3b for the period between January 9, 2015, and March 10, 2015.</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 Suzanne Malloy | 15. Title of Person Signing Vice-President, Regulatory Affairs |
| 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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