APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA for SES-15 for AMC-1 @ 129.0 WL + AMC-1 @ 130.9 WL

| Name: | Row 44 Inc. | Phone Number: | 2024166742 |
|-----------|--|---------------|------------------------|
| BA Name: | | Fax Number: | United States |
| reet: | c/o Global Eagle Entertainment Inc. | E–Mail: | dkeir@lermansenter.com |
| | 6100 Center Drive, Suite 1050 | | |
| ity: | Los Angeles | State: | CA |
| ountry: | USA | Zipcode: | 90045 – |
| ttention: | Mr Simon McLellan | | |

| 2. Contact | | | | | | |
|--|-----------------------|-------------------------|------------------------|--|--|--|
| Name: | David S. Keir | Phone Number: | 202-429-8970 | | | |
| Company | y: Lerman Senter PLLC | Fax Number: | 202–293–7783 | | | |
| Street: | 2001 L Street, NW | E–Mail: | dkeir@lermansenter.com | | | |
| | Suite 400 | | | | | |
| City: | Washington | State: | DC | | | |
| Country: | USA | Zipcode: | 20036 – | | | |
| Attention | 1: | 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 IB2018001553 | | | | | | |
| 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 Gra | nt OC | Change Station Location | • Other | | | |
| | | | | | | |
| 6. Requested Use Pri | or Date | | | | | |
| 05/21/2018 | | | | | | |
| 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 RequestAttachment 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.) | | | | | | |
| Request for special temporary authority for an initial period of sixty (60) days commencing May 21, 2018 to operate up to 110 SAA antennas and 110 GSAA antennas using space segment capacity on the SES-15 satelite at 129 degrees W.L. and the AMC-1 satellite at 130.9 degrees W.L. prior to action on Row 44's application to modify its license to | | | | | | |
| 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 Simon McLellan | 15. Title of Person Signing Chief Engineer | | | | | |
| 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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12. Description

Request for special temporary authority for an initial period of sixty (60) days commencing May 21, 2018 to operate up to 110 SAA antennas and 110 GSAA antennas using space segment capacity on the SES-15 satelite at 129 degrees W.L. and the AMC-1 satellite at 130.9 degrees W.L. prior to action on Row 44's application to modify its license to specify use of these satellites under its ESAA license (Call Sign E080100). See Attached Explanatory Statement.