

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

STA for Spaceflight Sherpa-AC1

1. Applicant

Name:	Moynk Properties, LLC	Phone Number:	800-927-9800
DBA Name:		Fax Number:	
Street:	251 Little Falls Dr.	E-Mail:	information@moynkproperties.com
City:	Wilmington	State:	DE
Country:	USA	Zipcode:	19808 -
Attention:			

2. Contact			
Name:	T. Kelmendi	Phone Number:	800-927-9800
Company:	Moyнк Properties, LLC	Fax Number:	
Street:	251 Little Falls Dr.	E-Mail:	information@moyнкproperties.com
City:	Wilmington	State:	DE
Country:	USA	Zipcode:	19808 -
Attention:		Relationship:	
(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. CityKapolei	8. Latitude (dd mm ss.s h) 0 0 0.0
9. State HI	10. Longitude (dd mm ss.s h) 0 0 0.0
11. Please supply any need attachments. Attachment 1: Narrative 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.) Moynk seeks STA to add Spaceflight, Inc.'s Sherpa-AC1 satellite, Call Sign S3133, as an additional point of communication to its fixed earth station located in Kapolei, Hawaii, Call Sign E202006. Please see narrative.	
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. ☒ Yes ☐ No	
14. Name of Person Signing T. Kelmendi	15. Title of Person Signing Sr. Space Program 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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