

(REFERENCE COPY - Not for submission)

Amendment to a Analog LPTV Legal STA Application

File Number: 000	00199368	Submit Date: 10/14/2022	Call Sign: K38IM	Facility ID: 40743	FRN: 0026455469	State:
New Mexico	City: ALBUQUERQUE					
Service: LPA	Purpose:	egal STA Amendment	Status: Dismissed	Status Date: 01/04/20	D23 Filing Status: In	Active

General	Section	Question	Response	
Information				
Fees, Waivers,	Section	Question	Response	
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?	Yes	
		Indicate reason for fee exemption:	Filing fee waived per DA 22- 817	
	Waivers	Does this filing request a waiver of the Commission's rule(s)?	No	
		Total number of rule sections involved in this waiver request:		

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
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Authorization Holder Name

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Name	Address	Phone	Email	Contact Type
Susan Hansen <i>Consultant</i> B. W. St. Clair	Susan Hansen 2305 Vida Shaw Rd. New Iberia, LA 70563 United States	+1 (303) 378- 8209	STCL@comcast.net	Technical Representative
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Randy Weiss <i>CEO</i> EDGE SPECTRUM, INC.	Randy Weiss PO Box 54025 Hurst, TX 76054 United States	+1 (214) 770- 7770	randy@crosstalk.org	Legal Representative
Caleb Weiss <i>President</i> ARK Multicasting, Inc.	Caleb Weiss PO Box 4655 Cedar Hill, TX 75106 United States	+1 (972) 293- 2256	cweiss@arkmulticasting. com	Legal Representative
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Contact

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Representatives

Channel and Facility Information	Section	Question	Response
	Facility ID	40743	
	State	New Mexico	
	City	ALBUQUERQUE	
	LPA Channel	38	

General Certification Statements The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as agains the regulatory power of the United States because of the providuo use of the same. whether by authorization or otherwise, and requests an Authorization accordance with this application (See Section 304 of the Communications Act of 1934, as amended.). The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5001 of the Anti-Drug Abuse Act of 1998, 21 U.S. 2, 802, Education of the communications Act or 1998, 21 U.S. 2, 802, Education of the advection for possession or distribution of a controlled substance. This certification dees not apply to applications field is services exempted under \$1,0002(r) of the nules, 47 CFR. See §1. 2002(r) of the nules, 47 CFR, 51 2002(t), the delimition of "party to the application" as used in this cartification §1.2002 (c). The Applicant certifies that all statements made in this application, and an tree used in this cartification §1.2002 (c). The Applicant certifies that all statements made in this application, and an tree used in this cartification \$1.2002 (c). The Applicant certifies that all statements made in this application, and a reture, complete, correct, and mateis incorporated by reference are material, are part of this application or coverage requirements. Failure to meet the construction or coverage requirements will recent in automatic cancellation of the Authorization Holder may be subject to certain concellation of the Authorization construction or coverage requirements. Failure to meet the construction or coverage requirements will recent in automatic cancellation of the Authorization tedperation of Authorization requirements that apply to the type of Authorization requirements that apply to the type of Authorization requirements that apply to the type	Certification	Section	Question	Response
other party to the application is subject to a denial of Federal benefits pursuant to \$5301 of the AniI-Dira Abuse Act of 1988, 21 U.S.C. \$862, because of a conviction for possession or distribution of a controlled substance. This certification dase not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR. See §1.2002(b) of the rules, 47 CFR. See §1.2002(c) (c). The Applicant certifies that all statements made in this application, and are true, complete, correct, and made in good faith. Authorized Party to Sign FALLUEE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION TO PORFEITURE OF ANY TEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Nulleful: LASC STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNEMALE BY FINE AND (OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. C			frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act	
DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §303).YesI certify that this application includes all required and relevant attachments.YesI declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for theRANDALL WEISS CEO			other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in	
relevant attachments. I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the RANDALL WEISS CEO		Authorized Party to Sign	DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.	
representative of the above-named applicant for the CEO				Yes
10/14/2022			representative of the above-named applicant for the	CEO

File Name	Uploaded By	Attachment Type	Description
40743 Albuquerque, NM.pdf	Applicant	General Information	Exhibit
Edge IDE Dismissal.pdf	Internal	All Purpose	
ESI Request for Extension of Invoice Deadline - Albuquerque .pdf	Applicant	Amendment	ESI Request for Extension of Invoice Deadline -Albuquerque