SCRPStatus Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002736

Applicant Information

Applicant FRN 0021426093 Applicant Address 3350 SW 148TH Avenue

Applicant Name Latam Telecommunications, L Applicant City Miramar

Applicant Email apellerano@latamtelecomusa Applicant State FL

Applicant Phone 3054183484 Applicant ZIP Code 33027

Contact Information



Is the contact the same as the contact listed on the Application Request for Funding Allocation? If not, please list below.

Contact Name Arturo Pellerano Contact Address 3350 SW 148TH Avenue

Contact Email apellerano@latamtelecomusa Contact City Miramar

Contact Phone 3054183484 Contact State FL

Contact ZIP Code 33027

2024-07-08

^{*}Indicate which deadline you are meeting with this filing.

Explanation of Effort and Availability of Commercial Equipment

*Provide an explanation of efforts undertaken, and challenges encountered, in permanently removing, replacing, and disposing of covered communications equipment or service.

LATAM has undertaken the following steps with respect to the replacement of covered equipment and services:

- (1) The company conducted a technical evaluation of the solutions of several providers to ensure that it will be able to maintain the same functionalities and guarantee a successful migration.
- (2) The company selected the providers of replacement equipment and services.
- (3) The company evaluated the dimensioning and acquisition of additional infrastructure for the installation of the new platform, such as power, space, cabling, servers, network equipment (routers), and additional labor.
- (3) The company tested the replacement equipment, which included hardware, software, functionalities, operating processes, integration to OSS and BSS systems, and training of on-site and operations center personnel.
- (4) The company designed its migration plan and coordinated with other carriers that connect to the platform.
- (5) The company completed the migration to the new equipment.
- (6) As of the date of this filing, LATAM has completed the removal and replacement of 100% of the Huawei platform equipment. In addition, on June 20, 2024, LATAM initiated the disposal of all covered equipment.

*Explain whether you are finding commercially available equipment in the marketplace. If not, then explain efforts taken to obtain replacement equipment.

LATAM found available equipment in the marketplace.

* If there is additional information relevant to the preceding questions or that you believe the
Commission should be aware of, please include the information below.
N/A

ProgramCompliance
*Indicate whether recipient has fully complied with (or is in the process of complying with) all requirements of the Reimbursement Program.
Yes No
*Indicate whether recipient has permanently removed from its communications network all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipients application request for funding.
Yes No
If recipient has not yet completed the removal process, what estimated percentage of the removal process have you completed?
*Indicate whether recipient has replaced all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.
Yes No
If recipient has not yet completed the replacement process, what estimated percentage of the replacement process have you completed?
*Indicate whether recipient has disposed of all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.
Yes No
If recipient has not yet completed the disposal process, what estimated percentage of the disposal process have you completed?
*Indicate whether recipient has fully complied with (or is in the process of complying with) the timeline submitted by the recipient. If not, provide explanation for deviation. Yes No

*The filer has indicated no to a question in this section, please provide additional information.	

Certifications

*By checking the box and providing the electronic signature where indicated below, the Certifying Official on behalf of the filer certifies under penalty of perjury that:

(1) The Certifying Official is authorized to submit this status report on behalf of the abovenamed filer and, based on information known to me or provided to me by employees responsible for the information being submitted, the information set forth in this status report has been examined and is true, accurate, and complete, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. The Certifying Official acknowledges that any false, fictitious, or fraudulent information or statement, or the omission of any material fact on this status report or on any other document submitted by the filer may subject the filer and the undersigned to punishment by fine or forfeiture under the Communications Act (47 U.S.C. §§ 502, 503(b), 1606), or fine or imprisonment under Title 18 of the United States Code (18 U.S.C. § 1001, §§ 286-287, and § 1343), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729-3733, and §§ 3801-3812). (2) The filer is in compliance with the statute, rules, and orders governing the Reimbursement Program, including but not limited to allocations, draw downs, payments, obligations and expenditures of money, and the Certifying Official acknowledges that failure to be in compliance and remain in compliance with those statutes, rules, and orders mayresult in thedenial of funding, cancellation of funding commitments, and/or recoupment of past disbursements. The Certifying Official acknowledges that the filer will maintain detailed records, including receipts, of all costs eligible for reimbursement actually incurred for a period of 10 years; and will file all required documentation for its expenses. The Certifying Official acknowledges that failure to comply with the statute, rules, and orders governing the Reimbursement Program could result in civil or criminal prosecution by law enforcement authorities.

Certifier Information

Certifier

Signature Arturo Pellerano Certifier Phone 305-418-3484

Certifier Name Arturo Pellerano Certifier Email apellerano@latamtelecomusa.

Certifier Title Treasurer

Date Signed 2024-07-08