

UNITED STATES DESIGNATED AGENT LETTER

Date: 28APR2025

TO: Federal Communication Commission
Equipment Authorization Branch
7435 Oakland Mills Road
Columbia, MD 21046

Applicant

U.S. designated agent

Company Name:	OXOS Medical, Inc	Company Name:	OXOS Medical, Inc
FRN:	0032919862	FRN:	0032919862
Grantee Code:	2A8SX	Grantee Code:	2A8SX
Contact Name:	Stephanie Anderson	Contact Name:	Stephanie Anderson
Address:	1100 Peachtree Street, Suite 700	Address:	1100 Peachtree Street, Suite 700
City/Province/Zip:	Atlanta, GA 30309	City/Province/Zip:	Atlanta, GA 30309
Telephone:	(855)733-9729	Telephone:	(855)733-9729
Fax:	N/A	Fax:	N/A
Email:	stephanie.anderson@oxos.com	Email:	stephanie.anderson@oxos.com

Applicable Equipment: FCC ID: 2A8SX-W1

ATTN: Director of Certification:

We, OXOS Medical, Inc and OXOS Medical, Inc understand and acknowledge the applicants consent and the designated agent's obligation to accept service of process in the United States for matters related to the applicable equipment, and at the physical U.S. address and e-mail of the designated agent listed above.

We, OXOS Medical, Inc and OXOS Medical, Inc acknowledge the applicant's acceptance of its obligation to maintain an agent for service of process in the United States for no less than one year after either the grantee has permanently terminated all marketing and importation of the applicable equipment within the U.S., or the conclusion of any Commission-related administrative or judicial proceeding involving the equipment, whichever is later.

Applicant

U.S. designated agent

Name *(Printed)*: Stephanie Anderson

Name *(Printed)*: Stephanie Anderson

Title: Sr. Quality Engineer, Verification & Validation

Title: Sr. Quality Engineer, Verification & Validation

Signature: *Stephanie Anderson*

Signature: *Stephanie Anderson*