

## Declaration of Authorization

We

Name: < LIFI LABS INC >  
Address: 524 Union St #309 San Francisco, CA, 94133 United States of merica...  
City: ... San Francisco , California .....  
Country: ... United States .....

Declare that:

Name Representative of agent: Ivy Zhu.....<sup>(1)</sup>  
Agent Company name: Shenzhen Morlab Communications Technology Co., Ltd. ....  
Address: FL.3, Building A, FeiYang Science Park, No.8 LongChang Road,  
Block 67, BaoAn District, ShenZhen, GuangDong Province,  
P. R. China 518100 .....

City: ShenZhen  
Country: China.....

is authorized to apply for Certification of the following product(s):

Product description: ..... LCM .....

Type designation: ..... LCM1V4T .....

Trademark: ..... LIFX .....

on our behalf.

Date: ..... 2015/3/24.....

City: ..... San Francisco .....

Name: ..... Marc Alexander .....<sup>(2)</sup>

Function: ..... VP Engineering.....

Signature: ..... 

**Notes:**

(1): Required for FCC application

(2): For FCC it must be the Grantee Code "owner" or the authorized agent.