

Power of Attorney

Name or model type of
the Specified Radio Equipment: Percussa Wireless AudioCube

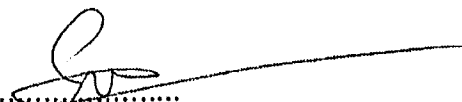
Applicant's company name: Noisetron LLC

Applicant's company address: 340 S Lemon Ave. #4098
91789 Walnut, CA

Applicant's name: Bert Schiettecatte

Date and Applicant's Signature:

2/6/2016



Job Title and Department: LLC MEMBER

It is necessary, that the person registered with FCC, signs this form.

I hereby authorize the following person as a representative and all rights regarding the application to obtain Type Certification for the Specified Radio Equipment (mentioned above) are delegated.

Attorney's Company name: m. dudde hochfrequenz-technik

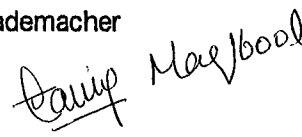
Attorney's Company address: Rottland 5 a

51429 Bergisch Gladbach

Attorney's Name: Mrs. Anja Hittig-Rademacher
Mr. Tariq Maqbool

Date and Attorney's Signature:

16.02.2016



Job Title and Department: homologation department