

Local Representative Letter
For Certification Service in the USA

Federal Communications Commission

Equipment Authorization Division, Application Processing Branch
7435 Oakland Mills Road
Columbia, MD 21048

To whom it may concern

Pursuant to Section 2.911(d)(7), of the Commission's Rules (47 C.F.R.) we attest as follows for the product listed below:

FCC ID	Model name
2BOHWAUTOTQ	AutoTQ

We hereby acknowledge as follows:

- i. both signees confirm that the point of contact accepts responsibility to act as a US-American Representative on behalf of the applicant
- ii. the point of contact provides the physical U.S. address and email as listed below
- iii. both parties maintain the requirements of this agreement for no less than one year after the grantee has terminated all marketing and importation or the conclusion of any Commission-related proceeding involving the equipment.
- iv. An expiration date for this letter does not exist. In case the U.S. agent changes, the grantee is obligated to notify the FCC within 30 days via the granting TCB.

US-American Point of Contact		Applicant/Approval Holder	
Signature:		Signature:	
Signature	Date: 2025-5-12	Signature	Date: 2025-5-12
Company	Golden Hour Medical, Inc.	Golden Hour Medical, Inc.	
Name:			
FRN:	0036851459	0036851459	
Contact	Hannah Herbst	Hannah Herbst	
Name:			
Address:	6590 W Rogers Cir. Suite 4 Boca Raton Florida 33487 United States	6590 W Rogers Cir. Suite 4 Boca Raton Florida 33487 United States	
Phone:	(561) 866-9697	(561) 866-9697	
Email:	hannah@goldenhourmedical.com	hannah@goldenhourmedical.com	