

Declaration of Authorization

We

Name: ONYX Healthcare Inc.
Address: 2F, No.135, Lane235, Pao chiao Rd., XINDIAN DIST.,
City: New Taipei City
Country: Taiwan

Declare that:

Name Representative of agent: Vincent Lin
Agent Company name: DEKRA Testing and Certification Co., Ltd.
Address: No.5-22, Ruishukeng, Linkou Dist.,
City: New Taipei City 24451,
Country: Taiwan, R.O.C.

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

Product Name: Fanless Medical Grade Box PC

Model: VISTAHUB-W

FCC ID: RZ5-VISTAHUB-W

Trademark: *VistaHub™*

on our behalf.

This is valid until **2018/10/20**, or until FCC and IC certification are completed, whichever comes sooner.

Date: 2017/10/20

City: New Taipei City

Name: Andrew Wang

Function: Manager

Signature:

