

Verto Medical Solutions, LLC

Authority to Act as Agent

Date: 2014-5-20

To Whom It May Concern:

We, the undersigned, hereby authorize SGS-CSTC Standards Technical Services Co., Ltd. (SGS) Shenzhen Branch and Hellen Wang in SGS-CSTC Standards Technical Services Co., Ltd. (SGS) Shenzhen Branch to act on our behalf in all matters relating to all processes required in FCC approval and any communication needed with the national authority, shall have the same legal authority as acts on our own behalf.

We certify that we are not subject to denial of federal benefits, that includes FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. 862. Further, no party, as defined in 47 CFR 1.2002 (b), to the application is subject to denial of federal benefits, that includes FCC benefits.

Thank you,

Agency Agreement Expiration Date: 12 months

By:


(Signature)¹

Aaron Gorga
(Print name)

Title:

Manager of Product Development

On behalf of:

Verto Medical Solutions, LLC
(Company Name)

Telephone:

+1 (314) 553-9950

¹ - Must be signed by applicant contact given for applicant on the FCC site, or by the authorized agent if an appropriate authorized agent letter has been provided. Letters should be placed on appropriate letterhead.