

SHENZHEN QI SHENGLONG INDUSTRIALIST CO.,LTD.

12/17/2015

EMCCert DR. RAŠEK GmbH
Stoernhofer Berg 15
91364 Unterleinleiter
GERMANY

Attn: Director of Certification

Authority to Act as Agent

On our behalf, I appoint ____ Shenzhen STS Test Services Co., Ltd; 1/F A, Building 2, Zhuoke Science Park, Chongqing Road, Fuyong, Baoan District, Shenzhen, China; ____ bovey Yang_____. to act as our agent in the preparation of this application for equipment certification. I certify that submitted documents properly describe the device or system for which equipment certification is sought. I also certify that each unit manufactured, imported or marketed, as defined in the **Federal Communications Commission's** regulations will have affixed to it a label identical to that submitted for approval with this application.

For instances where our authorized agent signs the application for certification on our behalf, I acknowledge that all responsibility for complying with the terms and conditions for certification, as specified by EMCCert DR. RAŠEK GmbH, still resides with ____ SHENZHEN QI SHENGLONG INDUSTRIALIST CO.,LTD. / 5F.,Blk 6A, Jing Nan Industry,Bai Ge long,Buji,Shenzhen,China

Dated 12/17/2015
this _____

Agency agreement expiration date: Usually Give 8 - 12 Months

By: 黄德荣 **Derong Huang**

Signature

Printed

Title: Manager

On behalf of : SHENZHEN QI
SHENGLONG
INDUSTRIALIST CO.,LTD.

Telephone: 0755-28880088