HEALTH & LIFE CO., LTD.

Declaration of Authorization

We Name: Address: City: Country:	New Taipei Ci	FE CO., LTD. an Yi Road, Zhonghe District, New Taipei City, Taiwan ity
Declare that:		
Name Representativ Agent Company nan Address: City: Country		Vincent Lin ⁽¹⁾ QuieTek Corp. No. 5-22, Ruishukeng, Linkou Dist., 24451, New Taipei City Taiwan. R.O.C.
is authorized to apply	y for Certificatio	on of the following product(s):
Product description: FCC ID: Trademark: Validity/ expiry date	Automatic Arm Blood Pressure Monitor	
on our behalf.		
Date:	Mar. 31, 2016	
City:	New Taipei City	
Name:	Albert Lee (2)	
Function:	President	
Signature:	Alles	Jee

Notes:

^{(1):} Required for FCC application

^{(2):} For FCC it must be the Grantee Code "owner" or the authorized agent.