## Flint Rehabilitation Devices LLC

## **Declaration on Model Differences**

1	Λ	•	_
١	/\	•	$\boldsymbol{\sim}$

Flint Rehabilitation Devices LLC

18023 Sky Park Circle Ste. H2 Irvine CA 92614, United States

Declare that the following product(s):

Product Name: FitMi Motion Interface Model Number: FitMi Receiver, FMR001

FCC ID: 2ALVF-FMR001

Utilize the identical circuit design, PCB layout, shielding and interface with (**FMR001**), only the model number and colour are difference. Therefore this application can be regarded as identical in performance to the submitted test sample.

The manufacturer would take all the responsibilities for the above product(s).

For and on behalf of

Irvine CA 92614, United States

Authorized person

Location

Name: **Daniel Monroy** 

Position: Manager

Date of issue: 2017-04-20

<sup>\*</sup>I hereby declare that I am entitled to sign on behalf of the applicant and that the information supplied is correct and complete.