

Declaration of Authorization

| We Name: Address: City: Country: | Essence Smartcare Ltd. 12 Abba Eban avenue, Ackerstein Tower Bldg. D, P.O.Box 2073 Herzliya 4612001 Israel |
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| Declare that: | |
| Name Representativ Agent Company nan Address: City: Country | |
| is authorized to apply | y for Certification of the following product(s): |
| Product description: Type designation: Trademark: Validity/ expiry date | Emergency Pendant with/without Fall Detection ES700EPAJ, ES700EPPJ Essence Smartcare June 02, 2020 |
| on our behalf. | |
| Date: | June 02, 2019 |
| City: | Herzliya |
| Name: | Tal Cohen |
| Function: | Certification Manager |
| Signature: | Muz |