

iHealth Labs, Inc.

TO: Federal Communication Commission
Equipment Authorization Branch
7435 Oakland Mills Road
Columbia, MID 21046

Date: 2023-07-13

Regarding: *FCC ID: SLRAM6*

To whom it may concern:

We, the undersigned, hereby authorize SGS-CSTC Standards Technical Services Co., Ltd. to act on our behalf in all manners relating to application for equipment authorization with respect to the FCC ID above, including signing of all documents relating to these matters. Any and all acts carried out by the agent on our behalf shall have the same effect as acts of our own.

We, the undersigned, hereby certify that we are not subject to a denial of federal benefits, that includes FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. 853(a).

Where our 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 SGS North America, Inc., still resides with *iHealth Labs, Inc.*

This authorization is valid until further written notice from the applicant.

Sincerely,

Print Name: Ming Cong

Title: Director of Device

Signature:



On behalf of Company: iHealth Labs, Inc.

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