

Advanced Microwave Engineering
Via Lucca 50,54 50142 Firenze (FI) Italy

Nemko Canada Inc
303 River Road
Ottawa, Ontario, Canada
K1V 1H2

Attn: Director of Certification


Authority to Act as Agent

On our behalf, I appoint Nemko Canada Inc. 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 Industry Canada's regulations will have affixed to it a lab 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 Nemko Canada Inc, still resides with Advanced Microwave Engineering, via Lucca 50,54 50142 Firenze (FI) Italy.

Dated **22** **Day of** **November** **20** **19**
this _____ _____ _____

Agency agreement expiration date: June 30th of 2020

By:  **Filippo Bonifacio**

Signature **Printed**

Title: **General Manager**

On behalf of : **Advanced Microwave Engineering**

Telephone: **+39(0)5573921**