## **REXING INC.**

34 Ludwig St, Little Ferry New Jersey United States

## **UNII Device Declaration Letter**

To whom it may concern:

We have declared below featured for FCC equipment authorization, Device FCC ID: 2AW5W-CPW

	Master
$\overline{\langle}$	N/A

☐ Client with Radar detection capability ☐ Client without radar detection capability,

(2) Active / Passive Scanning , adhoc mode access point capability

Frequency Band (MHz)	Active Scanning (the device can transmit a probe (beacon))		passive scanning (where the device is can listen only with no probes)		Ad Hoc Mode capability		Access point capability	
5180-5240	🗌 Yes	🛛 No	🛛 Yes	🗌 No	🗌 Yes	🖂 No	🗌 Yes	🛛 No
5190-5230	Yes	🛛 No	🛛 Yes	🗌 No	Yes	🛛 No	Yes	🖂 No
5210-5210	Yes	🛛 No	🛛 Yes	🗌 No	Yes	🛛 No	Yes	🖂 No

- (3) Country code selection ability See Yes No If yes, pls explain how it was implemented:
- (4) Meet 15.202 requirement ⊠ Yes □ No pls check below :

A master device is defined as a device operating in a mode in which it has the capability to transmit without receiving an enabling signal. In this mode it is able to select a channel and initiate a network by sending enabling signals to other devices

A client device is defined as a device operating in a mode in which the transmissions of the device are under control of the master. A device in client mode is not able to initiate a network.

(5) For client devices that have software configuration control to operate in different modes (active scanning in some and passive scanning in others) in different bands (devices with multiple equipment classes or those that operate on non-DFS frequencies) or modular devices which configure the modes of operations through software, the application must provide software and operations description on how the software and / or hardware is implemented to ensure that proper operations modes cannot be modified by end user or an installer.

(If apply, pls help to provide explanation on it was implement, and how software was controlled)

Should you have any questions or comments regarding this matter, please have my best attention.

Sincerely,

(Signed)

Name/Title: Company: Address: Phone: Fax: E-Mail: Yuhe Sun/General Manager REXING INC. 34 Ludwig St,Little Ferry New Jersey United States 2032144881 001 2032144881 islandsunyuhe@gg.com