




**U.S. Agent Designation for Service of Process
(Applicant and U.S. Agent are Separate Parties)**

TO:

Kiwa Nederland B.V.
Wilmersdorf 50
7327 AC Apeldoorn
Postbus 137
7300 AC Apeldoorn
Netherlands

ATTENTION: FCC Certification – Section 2.911(d)(7) Information

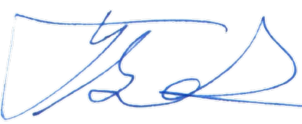
Designated U.S. Agent

| | |
|----------------------|--|
| Company name: | GEMINI MEDICAL TECHNOLOGIES LLC |
| FRN: | 0033788001 |
| Contact person name: | Jackelyn Rodriguez |
| Street address: | 123 NW 13TH STREET , SUITE 212 |
| ZIP/City/State | 33432, BOCA RATON, FLORIDA, UNITED STATES |
| Telephone number: | 833.943.6464 |
| Email address: | jrodriguez@geminimedtech.com |
| Signature: |  |
| Date: | Jackelyn Rodriguez Signer ID: 0E4CZ3SGV5... 08 Jun 2023, 17:29:03, EDT 07-08-2023 |

This letter is to confirm that we ("the Designated U.S. Agent) have accepted the responsibility to act as the Designated U.S. Agent for Service of Process as required by section 47 CFR 2.911(d)(7) on behalf of the **Applicant** noted below.

The Applicant acknowledges that they must maintain an agent for no less than one year after terminating all marketing and importation OR the conclusion of any Commission-related proceeding involving the equipment. The applicant further acknowledges their responsibility to inform the FCC whenever the Designated U.S. Agent information above changes.

Applicant

| | |
|------------------------|---|
| Company name: | MEDKONSULT medical technology s.r.o. |
| Grantee Code: | 2A8XB |
| Contact person name: | Ing. Martin Skutek |
| Street address: | Pasturova 67/15, Klasterni Hradisko |
| ZIP/City/State/Country | 779 00, Olomouc, Czech Republic |
| Telephone number: | +420 581 113 030 |
| Email address: | martin.skutek@mmtsystems.com |
| Signature: |  |
| Date: | 07-06-2023 |

Revision Record Sheet:

| Revision | Section number | Page number | Date | Remark(s) | issued by |
|----------|----------------|-------------|------------|----------------------------|-----------|
| 01 | | | 07-02-2023 | 1 st version | RvdM |
| 02 | | 1 | 15-05-2023 | Added FRN to Agent details | RvdM |

Issued/modified by : Richard van der Meer
Function : Certification assessor
Revision : 02
Date : 15-02-2023

Verified by : Willem Jan Jong
Function : Team Lead
Date : 16-02-2023

Released by : Axel Gase
Function : Manager Quality Assurance
Date of release: : 19-02-2023

Signature Certificate



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Name: Jackelyn Rodriguez
Email: jackelyn@comcast.net
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Location: MOUNT LAUREL TOWNSHIP, NJ (US)
Date: 08 Jun 2023, 17:29:03, EDT
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Security Level: Email, Account Login Password Authentication

Jackelyn Rodriguez
Signer ID :0E4CZ3SGV5...
08 Jun 2023, 17:29:03, EDT

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| Signed Document(s) | Link emailed to jackelyn@comcast.net |