Declaration of Authorization

We Name: Address: City: Country:	Telematics Wireless Ltd. 26 Hamelacha street, POB 1911Holon, 58117Israel
Declare that:	
Name Representati Agent Company na Address: City: Country	ve of agent: Michael Nikishin
is authorized to apply for Certification of the following product(s):	
Product description: Type designation: Trademark: Validity/ expiry date	
on our behalf.	
Date:	October 31, 2019
City:	Holon
Name:	Roman Sternberg (2)
Function:	VP marketing
Signature:	Al New /
Notes: (1): Required for FCC application	

(2): For FCC it must be the Grantee Code "owner" or the authorized agent.