

## UNITED STATES DESIGNATED AGENT LETTER

Date: 28APR2025

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

### ***Applicant***

### ***U.S. designated agent***

|                    |                                  |                    |                                  |
|--------------------|----------------------------------|--------------------|----------------------------------|
| Company Name:      | OXOS Medical, Inc                | Company Name:      | OXOS Medical, Inc                |
| FRN:               | 0032919862                       | FRN:               | 0032919862                       |
| Grantee Code:      | 2A8SX                            | Grantee Code:      | 2A8SX                            |
| Contact Name:      | Stephanie Anderson               | Contact Name:      | Stephanie Anderson               |
| Address:           | 1100 Peachtree Street, Suite 700 | Address:           | 1100 Peachtree Street, Suite 700 |
| City/Province/Zip: | Atlanta, GA 30309                | City/Province/Zip: | Atlanta, GA 30309                |
| Telephone:         | (855)733-9729                    | Telephone:         | (855)733-9729                    |
| Fax:               | N/A                              | Fax:               | N/A                              |
| Email:             | stephanie.anderson@oxos.com      | Email:             | stephanie.anderson@oxos.com      |

Applicable Equipment: FCC ID: 2A8SX-W1

ATTN: Director of Certification:

We, OXOS Medical, Inc and OXOS Medical, Inc understand and acknowledge the applicants consent and the designated agent's obligation to accept service of process in the United States for matters related to the applicable equipment, and at the physical U.S. address and e-mail of the designated agent listed above.

We, OXOS Medical, Inc and OXOS Medical, Inc acknowledge the applicant's acceptance of its obligation to maintain an agent for service of process in the United States for no less than one year after either the grantee has permanently terminated all marketing and importation of the applicable equipment within the U.S., or the conclusion of any Commission-related administrative or judicial proceeding involving the equipment, whichever is later.

### ***Applicant***

### ***U.S. designated agent***

Name *(Printed)*: Stephanie Anderson

Name *(Printed)*: Stephanie Anderson

Title: Sr. Quality Engineer, Verification & Validation

Title: Sr. Quality Engineer, Verification & Validation

Signature: *Stephanie Anderson*

Signature: *Stephanie Anderson*