

Attestation Statements

Date: 2025-09-26

TO: Federal Communications Commission
Authorization and Evaluation Division
7435 Oakland Mills Road
Columbia, MD 21046, USA

RE: Attestation Statements Part 2.911(d)(7) request for **(FCC ID: 2AAWH-PILLBOXURI1)**

MedMinder Systems, Inc., the undersigned, hereby authorize **MedMinder Systems, Inc.** to act as our designated agent for service of process, **MedMinder Systems, Inc.** accepts to maintain an agent for no less than one year after the grantee has terminated all marketing and importation or the conclusion of any Commission-related proceeding involving the equipment.

MedMinder Systems, Inc. accepts the responsibility to act as designated agent for service of process.

Applicant Information:

Company name: MedMinder Systems, Inc.
Contact Name: Eran Shavelsky
Address: 320 Norwood Park South, Norwood, MA 02062 United States
Telephone No: 6177929523
Email: eran@medminder.com
FRN: 0022933303

Signature: _____

Eran Shavelsky

Agent Information:

Company Name: MedMinder Systems, Inc.
Address: 320 Norwood Park South, Norwood, MA 02062 United States
FRN: 0022933303
Contact Name: Eran Shavelsky
Telephone No: 6177929523
Email: eran@medminder.com

Signature: _____

Eran Shavelsky