

**U.S. Agent Designation for Service of Process  
(Applicant is Both Grantee and U.S. Agent)**

**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**

This letter is to confirm that the Applicant will also serve as the U.S. Agent for Service of Process as required by 47 CFR 2.911(d)(7). 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 changes.

**Applicant & Agent**

|                            |                                                                                      |
|----------------------------|--------------------------------------------------------------------------------------|
| Company name:              | Verkada Inc                                                                          |
| FRN:                       | 0025887894                                                                           |
| Grantee Code:              | 2AWUU                                                                                |
| Contact person name:       | Joey Gomez                                                                           |
| Agent name:                | Verkada Inc                                                                          |
| Street address:            | 405 E 4th Ave                                                                        |
| ZIP/City/State             | San Mateo, CA 94401, United States                                                   |
| Telephone number:          | (510) 603-3943                                                                       |
| Email address:             | joey.gomez@verkada.com                                                               |
| Signature Contact person*: |  |
| Date:                      |                                                                                      |
| Signature Agent*:          |  |
| Date:                      |                                                                                      |

Note \*Must be signed by both the applicant, and agent on behalf