

Letter of Authorization

To:

PlacidWay
9800 Mount Pyramid Ct #400,
Englewood, CO 80112,
United States
+18882966664

To Whom It May Concern,

Hereby we authorize Mediround.Corp to act as a representative on behalf of the hospital for the following scope of work:

- 1) Sharing information to list the hospital on the site
- 2) Arranging appointments between the patients and the hospital
- 3) To give a fast reply on the hospital's behalf

Thank you in advance for your cooperation.

Sincerely,



(Signature of officer in charge)_

Hospital Name : Glassy Skin Clinic
Officer in charge : Judy Representative Doctor
Date : 2023.04.28