


<b>Field 1: Exporter Name and Address</b> LAVITA LLC 1350 N Grant St. Denver, CO 80203 United States Tax Identification Number: 38-4152494		<b>Field 2: Blanket Period for Multiple Entries</b> From: 03-19-2026 To: 03-19-2027				
<b>Field 3: Producer Name and Address</b> Vitalabs, Inc. 1451 Hwy 20 West McDonough, GA 30253 US Tax Identification Number: 58-0628465A		<b>Field 4: Importer Name and Address</b> Safana Pharma & Medical Supplies Import Company – Mother & Child Healthcare Product 20 Salah St., Zawia, Libya 2181010 Phone: +218 912120587 Fax: +218 912138513				
<b>Field 5:</b> Description of Good(s)		<b>Field 6:</b> HS Tariff Classification Number	<b>Field 7:</b> Preference Criterion	<b>Field 8:</b> Producer	<b>Field 9:</b> Regional Value Content	<b>Field 10:</b> Country of Origin
<b>Sales Order(s):</b> 492530/497264/498143 <b>Dietary Supplements:</b> B12 500mcg - VLI200-02 Lot:67043 Magnesium Bisglycinate - HS-MBG01 Lot:67044 Zinc 50mg - VLI465 Lot:67045 D3 10000 IU - RVS-378 Lot:67046 CoQ10 100mg - VLI517 Lot:67047 Blood Pressure Support - VLI032-06 Lot:71059 Wellness Guard - HS-BCV01 Lot:71060 Full-Spectrum Multi Complex - VLI079-06 Lot:71061		2936.90.0150 2936.90.0150 2936.90.0150 2936.90.0150 2936.90.0150 2936.90.0150 2936.90.0150 2936.90.0150	B B B B B B B	Vitalabs Vitalabs Vitalabs Vitalabs Vitalabs Vitalabs Vitalabs	US US US US US US US	
<b>Field 11: Certification of Origin</b> I CERTIFY THAT: <ul style="list-style-type: none"> <li>• THE INFORMATION ON THIS DOCUMENT IS TRUE AND ACCURATE AND I ASSUME THE RESPONSIBILITY FOR PROVIDING SUCH REPRESENTATIONS. I UNDERSTAND THAT I AM LIABLE FOR ANY FALSE STATEMENTS OR MATERIAL OMISSIONS MADE ON OR IN CONNECTION WITH THIS DOCUMENT.</li> <li>• I AGREE TO MAINTAIN AND PRESENT UPON REQUEST, DOCUMENTATION NECESSARY TO SUPPORT THIS CERTIFICATE, AND TO INFORM, IN WRITING, ALL PERSONS TO WHOM THE CERTIFICATE WAS GIVEN OF ANY CHANGES THAT COULD AFFECT THE ACCURACY OR VALIDITY OF THIS CERTIFICATE.</li> <li>• THE GOODS ORIGINATED IN THE TERRITORY OF THE PARTIES, AND COMPLY WITH THE ORIGIN REQUIREMENTS SPECIFIED FOR THOSE GOODS IN THE UNITED STATES-CHILE FREE TRADE AGREEMENT, AND UNLESS SPECIFICALLY EXEMPTED IN ARTICLE 4.11, THERE HAS BEEN NO FURTHER PRODUCTION OR ANY OTHER OPERATION OUTSIDE THE TERRITORIES OF THE PARTIES.</li> </ul>						
<b>Authorized Signature</b> 		<b>Company Name</b> Vitalabs, Inc.				
<b>Name (Print or Type)</b> Kirk Brackett		<b>Title</b> Quality Control Representative				
<b>Date (MM/DD/YY)</b> 03-19-2026		<b>Telephone:</b> 770-478-0007 <b>Fax:</b> 770-478-7373				
<b>Field 12: Remarks</b>						

