CERTIFICATE OF ORIGIN ORIGINAL

TO VALIDATE, GO TO Certificate Number: LA-COO-65907-68ee3e47ea233

Port of Loading

Destination Port

Exporting Carrier

Bill of Lading / AWB

Forwarding Agent

Weight

5360 kgs

Shanghai

Los Angeles

VERIFY.FTGS.US Date: October 14, 2025

Seller (Exporter) Doctor's Best, Inc 2742 Dow Ave Tustin CA 92780 USA

Buyer (Importer)

HAICANG DISTRICT XIAMEN, 361023

China

KINGDOMWAY HOLDING LIMITED

NO.299 WEST YANGGUANG ROAD

Consignee NINGBO LEADGO E-COMMERCE CO.,LTD. NO. 8H DISTRICT STANDARD FACTORY. CIXI EXPORT PROCESSING ZONE HANGZHOU BAY NEW ZONE NINGBO, ZHEJIANG

China

Owner or Agent

PO: CN-KDW-20250814

Import Permit Number

Transport Type

Destination Country

Air

China

Export Date

Consignor reference: INV-DRB-1870



Country of Origin

United States

(May include notes on Quantity, Item Number, Marks and Numbers, Kind of Packages.) DRB-00198 Natural Vitamin K2 MK-7 45 mcg 60 Veggie Caps ===end of products====



The Applicant (or the Applicant on behalf of the Consignor), by utilizing this document, certifies that: The above-mentioned goods originate in the country(ies) specified above and comply with the rules of origin applicable in the country(ies) to those goods.

The information in this certificate and in any documents provided to the Los Angeles Area Chamber of

Commerce ("LAACC") is accurate, true and complete.

The Applicant undertakes to advise LAACC and any other person(s) to whom the applicant provides this Certificate (or to whom the Certificate is provided to with the knowledge of the Applicant) promptly in writing of any inaccuracy, omission or change in such information, or in the origin of goods.

-The Applicant will maintain, and present upon request, such documentation as is necessary to verify the truth, accuracy and completeness of this certificate and accompanying documents.

-In consideration for the LAACC's issuance of this Certificate, the Applicant agrees to release, discharge and hold harmless LAACC from any liability in connection with the issuance of this certificate and to indemnify LAACC in respect of any costs and/or claims made against LAACC in connection herewith.

-The Applicant is authorized to give the undertakings set out herein.



Authorized Signature Farhad Ghorbani Fard

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This invoice must be completed in English. COMMERCIAL INVOICE										Page	of		
EXPORTER:								Ship Date:					
Tax ID#:							Air Wouhill No. / Treaking No.						
Contact Name: Telephone No.:							Air Waybill No. / Tracking No.:						
E-Mail:							Invoice No.: Purchase Order No.:						
Company Name/Address:							Payment Terms: Bill			of Lading:			
							Purpose of Shipment:						
Country:													
Parties to Transaction:													
Related Non-Related								SOLD TO (if different from Consignee):					
CONSIGNEE:													
Tax ID#: Contact Name:							Same as CONSIGNEE:						
Telephone No.:							Tax ID#:						
E-Mail:													
Company Name/Address:							Company Name/Address:						
Country:								Country:					
	-	d broker for	this shipment	, please prov	ide contact	information.							
Name of Br			7 .	_			act Name						
Duties and No. of	Taxes Pay No. of	able by Net Weight	Exporter Unit of	Consign			lease specify	Harmonized	Country of	Unit	<u> </u>	Total	
Packages	Units	(LBS / KGS)	Measure		Descrip	otion of Goods		Tariff Number	Manufacturer	Value		Value	
						·							
Total	Total	Total Net	(Indicate	Total Gross	(Indicate	Terms							
Pkgs	Units	Weight	LBS/KGS)	Weight	LBS/KGS)	of Sale:				Subtotal:			
										Insurance:			
Special Instructions:										Freight:			
										Packing:			
Declaration Statement(s):										Handling:			
										Other:			
I declare that all the information contained in this invoice to be true and correct.													
Originator or Name of Company Representative if the invoice is being completed on behalf of a company or individual:										Invoice Total:			
Originator AREA CHAMB	or Name of	Company R	epresentative	if the invoice	e is being co	mpleted on behal	τ ot a compan	y or individual:		Currency Code:			
Signature 1	Date	. (Gvon	ne D	oyle	Yvo	onne Do	yle Custon	ner Servic	e Lead 10/0	09/25		

REV. 02.28.12-1.07