

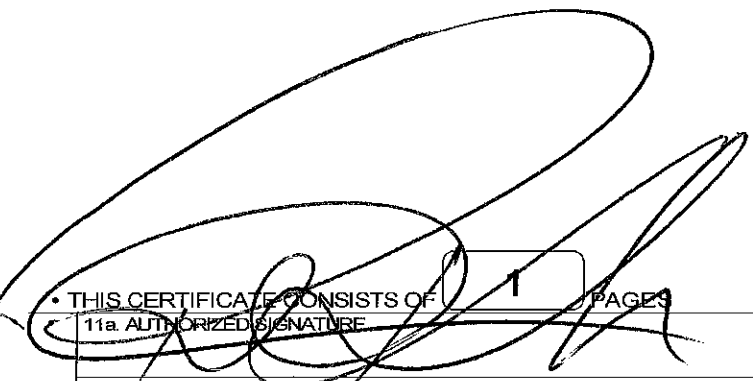
**CERTIFICATE OF ORIGIN**



EXPORTER NAME AND ADDRESS MAXTEC 2305 SOUTH 1070 WEST SALT LAKE CITY, UT. 84119  TAX IDENTIFICATION NUMBER: 27-3461171		BLANKET PERIOD (DDMMYY)  FROM 01/05/26  TO 08/11/26	
PRODUCER NAME AND ADDRESS   TAX IDENTIFICATION NUMBER:		IMPORTER NAME AND ADDRESS VIAMED 15 STATION RD, CROSS HILLS, KEIGHLEY WEST YORKSHIRE, GB BD20 7DT  TAX IDENTIFICATION NUMBER:	

DESCRIPTION OF GOOD(S)	HS TARIFF CLASSIFICATION NUMBER				COUNTRY OF ORIGIN
EYEMAX2, REGULAR 20 PACK (R300P01)	63079099				MX
EYEMAX2, PREEMIE 20 PACK (R300P02)	63079099				MX
EYEMAX2, MICRO 20 PACK (R300P03)	63079099				MX

THIS CERTIFICATE CONSISTS OF 1 PAGES

11a. AUTHORIZED SIGNATURE 		11b. COMPANY MAXTEC	
11c. NAME (Print or Type) ROBERT KIDRICK		11d. TITLE SHIPPING	
11e. DATE (DDMMYY) 01/05/26	11f. TELEPHONE NUMBER 385.549.8000	(Voice)	(Facsimile) 801.973.6090