

Declaration of Conformity to ISO 9001:2015 Certificate

(In accordance with ISO/IEC 17050-1)

Certificate Number:

APF 2019-01

Issuer's Name:

Advanced Pouch Fillers, Inc.

Issuer's Address:

861 Taylor Road, Suite E Gahanna, OH 43230, USA

Toll Free: 888.648.7878 Telephone: 614.863.0022 Fax: 614.751.0458

Object of the Declaration:

Advanced Pouch Fillers, Inc. Quality Management System

Conformity Document:

ISO 9001:2015 Quality Management Systems - Requirements;

Fifth Edition, Revision 2015-09-15

Scope & Exclusions:

Contractor of custom packaging for industrial needs, excluding design & development (7.3) and Control of Monitoring & Measuring Devices (7.6).

We declare that Advanced Pouch Fillers Inc.'s (APF) Quality Management described above fulfills the requirements of ISO 9001:2015 Quality Management Systems – Requirements; Fifth Edition, 2015-09-15. All supporting documentation and records are available for review by pertinent interested parties at APF's Corporate Office. Written Requests should be directed to the General Manager of APF and clearly state the reason of need to review.

The following signatures on behalf of Advanced Pouch Fillers Inc, Gahanna, Ohio, USA, attest & declare that these requirements have been fulfilled.

relsey Kiepatrick President

01/01/19

Name of Signatory Authority

Title/Function

Date of Issue

Name of Signatory Authority

Title/Function

Date of Issue

01/01/19

THIS CERTIFICATE EXPIRES 12/31/19

THIS DECLARATION OF CONFORMITY IS ISSUED UNDER THE SOLE RESPONSIBILITY OF ADVANCED POUCH FILLERS, INC.