



# CoA-274-00 Certificado de Análise



Source Document: CoA-YYY Certificate of Analysis

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Manufacturing Site <i>Fabricante</i> Blossom Genetics Lda; Estrada do Contador, 23 2130-017 Benavente, Portugal OMS Organisation Id. / OMS Location Id.: ORG-100048042 / LOC-100079458   DUNS Number: 44-947-5377   GMP certify.F084/001/2023					
Informação do Produto/ Product Information					
<b>Product description</b> <i>Descrição do produto</i>	Cannabis Dry Flower, Therismos, Sour OG Cheese, 50g jars				
<b>Client name</b> <i>Nome do cliente</i>	Therismos GmbH				
<b>Product code/ Batch number</b> <i>Código do produto/ N.º Lote</i>	11708375002	<b>Retest/ expiry date</b> <i>Data de reteste/ validade</i>	10/2026	<b>Package size</b> <i>Tamanho da embalagem</i>	50g
<b>Irradiated product</b> <i>Produto Irradiado</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Irradiation date</b> <i>Data de irradiação</i>	NA		
<b>Strain</b> <i>Estirpe</i>	Sour OG Cheese	<b>Pharmaceutical form</b> <i>Forma farmacêutica</i>	Cannabis flos	<b>Specification ref.</b> <i>Especificação de ref.</i>	SPEC-053
<b>Strenght (Note: label claim)</b> <i>Dosagem (Nota: alegação de rótulo)</i>	24/1 (THC/CBD)		<b>Label</b> <i>Rótulo</i>	WELLFORD LUMA 24/1 ZA SOC CANNABISBLÜTEN	
<b>Tests</b> <i>Testes</i>	<b>Reference Methods</b> <i>Métodos de Referência</i>	<b>Acceptance Criteria/ Critérios de Aceitação</b>			
		<b>Specifications</b> <i>Especificações</i>		<b>Results</b> <i>Resultados</i>	
Macroscopic Characterization -Identity A-	EP Identification A	Dark green to pale yellow or from light brown to reddish-brown with an aromatic odour.		Complies <sup>3)</sup>	
Microscopic Examination -Identity B-	EP 2.8.23 Identification B	Diagnostic characters of numerous glandular or covering trichomes, free or attached to epidermis can be observed under microscope.		Complies <sup>3)</sup>	
HPTLC -Identity C-	EP 2.8.25	Characteristics of intense /faint reddish-violet zones are detected in the chromatogram of the test solution, with Rf values corresponding to Rf values of the reddish-violet zones in the chromatogram of standard solutions of THC dominant type.		Complies <sup>2)</sup>	
Foreign Matter	EP 2.8.2	Maximum 2,0% w/w Absence of seed and any leaves with more than 1,0 cm in length		0% <sup>3)</sup>	
Loss on Drying	EP 2.2.32	Max. 12%		9% <sup>2)</sup>	
Assay*: THC Total CBD Total	EP 2.2.29	Minimum 5,0 % (Label Claim +/- 10%) Maximum 1,0%		23,11% <sup>2)</sup> 0,14% <sup>2)</sup>	
Related Substances: Cannabinol (CBN)*	EP 2.2.29	Maximum 1,0%		0,12% <sup>2)</sup>	
Heavy Metals	EP 2.4.27	Cd ≤ 0,3 ppm Pb ≤ 0,5 ppm Hg ≤ 0,1 ppm As ≤ 0,2 ppm		<0,01 ppm <sup>1)</sup> <0,05 ppm <sup>1)</sup> <0,05 ppm <sup>1)</sup> <0,01 ppm <sup>1)</sup>	
Pesticides	EP 2.8.13	Complies with Eur. Ph. requirements		Complies <sup>1)</sup>	

R03 - DOCUMENT APPROVALS			
R00 – Creation; R01 – Product info update; R02 – General layout update; R03 – Removal of the various laboratories to include only the one reference.			
Author – Confirming the technical content of this document  QA Director 10/07/2025	Document Owner – Confirming the technical content of this document Quality Assurance Manager 10/07/2025	Quality – Confirming compliance of this document with the Quality System  10-07-2025	
Blossom Genetics: Estrada do Contador, 23   2130-017 Benavente   Portugal			

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Microbiology:			
TAMC	Ph. Eur 2.6.12 & 5.1.8C	≤ 10 <sup>5</sup> CFU/g Maximum acceptable count: 500 000 CFU/g	<10 CFU/g <sup>2)</sup>
TYMC		≤ 10 <sup>4</sup> CFU/g Maximum acceptable count: 50 000 CFU/g	<10 CFU/g <sup>2)</sup>
Bile-tolerant gram (-) bacteria /Enterobacteriaceae	Ph. Eur 2.6.31 & 5.1.8C	≤ 10 <sup>4</sup> CFU/g	<10 CFU/g <sup>2)</sup>
Escherichia coli	Ph. Eur. 2.6.13 & 5.1.4	Absent/g	Absent/g <sup>2)</sup>
Salmonella		Absent/25g	Absent/25g <sup>2)</sup>
Mycotoxins:			
Aflatoxin B1	EP 2.8.18 & 2.8.22	≤ 2 µg/kg	< 0,25µg/kg (LOD) <sup>2)</sup>
Aflatoxins B1+B2+G1+G2		≤ 4 µg/kg	< 0,25µg/kg (LOD) <sup>2)</sup>
Ochratoxin		≤ 20 µg/kg	< 2 µg/kg (LOD) <sup>2)</sup>
<b>Support Information/ Informação de suporte:</b> CFU: Colony Forming Units; TAMC - Total Aerobic Microbial Count; TYMC - Total Yeast and Mold Count *Expressed in dried basis CoA from the supplier (date of analysis): CoA do fornecedor (data de análise): 1) The results correspond to supplier Raw Material – CoA No. 2658-002 (25/02/2025 to 13/05/2025); 2) The results correspond to Finished Product – CoA No. 26/0391 (14/01/2026 to 27/01/2026) 3) The results correspond to Finished Product – CoA No. 2600135 (26/01/2026 to 28/01/2026). Test methods and specifications are in accordance with Ph. Eur. Monograph 3028 – Cannabis flower, following the current version of the Ph. Eur. Suppl. (effective from 1 July 2024).			
<b>Testing Site:</b> Laboratório de Análise:	<b>LEF – Laboratório de Estudos Farmacêuticos</b> - Rua das Ferrarias del Rei 6A, Urbanização da Fábrica da Pólvora 2730-269 Barcarena, Portugal   GMP Certif. F032/S1/MH/001/2025 <b>Qplab Pharma Services, Tec Labs</b> – Centro de Inovação da FCUL, 1749-016 Lisboa, Portugal   GMP Certif. F067/S1/MH/001/2025		
<b>Storage conditions: Keep the package closed, away from light and in a dry environment. Keep in conditions below 25 °C.</b> Condições de conservação: Manter a embalagem fechada, ao abrigo da luz e em ambiente seco. Manter em condições abaixo de 25 °C.			
Approval/ Aprovação			
<input checked="" type="checkbox"/> <b>Comply/ Conforme/</b>  I hereby certify that the above information is authentic and accurate. This batch of product has been manufactured, including packaging/labelling and quality control at the above mentioned site(s) in full compliance with the GMP requirements of the local Regulatory Authority and with the approved specifications. Certifico que as informações acima são autênticas e corretas. Este lote de produto foi fabricado, embalado/rotulado e o controlo de qualidade, na(s) instalação(ões) acima referida(s), em total conformidade com os requisitos de BPF da autoridade reguladora local e com as especificações aprovadas.		<b>Pessoa Autorizada/ Authorized Person</b>  _____ Data, Nome e Assinatura Date, Name and Signature	
<input type="checkbox"/> <b>Non-compliant/ Não Conforme</b>			

DOCUMENT END

R03 - DOCUMENT APPROVALS		
R00 – Creation; R01 – Product info update; R02 – General layout update; R03 – Removal of the various laboratories to include only the one reference.		
Author – Confirming the technical content of this document	Document Owner – Confirming the technical content of this document	Quality – Confirming compliance of this document with the Quality System
 QA Director 10/07/2025	Quality Assurance Manager 10/07/2025	 10-07-2025
Blossom Genetics: Estrada do Contador, 23   2130-017 Benavente   Portugal		

# FRM-053-02 Liberação de Lote



FRM-053-02 Batch Release

Source Document: SOP-053 Liberação de Lotes

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N.º Lote/ Batch Number: 11708375002			
Descrição do Produto/ Product Description: Cannabis Dry Flower, Therismos, Sour OG Cheese, 50g jars			
Nome do Produto/ Product Name: WELLFORD LUMA 24/1 ZA SOC CANNABISBLÜTEN			
Alegação no Rótulo/ Label Claim: 24/1 (THC/CBD)		Dosagem (análise de produto acabado)/ Strength (finished product analysis): 23,11% THC/0,14% CBD	
Referência da especificação de libertação/ Release Specification Reference: SPEC-053			
Forma farmacêutica/ Pharmaceutical form: Cannabis flos	Produto Irradiado/ Irradiated product:	<input type="checkbox"/> Sim/Yes (Ver CoA/ See CoA)	<input checked="" type="checkbox"/> Não/No
Tamanho da embalagem/ Package size: 50g		Unidades de produto libertas/ Product units released: 1117 jars	
Data de fabrico/ Manufacturing date: 13/01/2026		Data de validade/ Expiry date: 10/2026	
Nome do Cliente/ Client name or Quality Agreement: Therismos GmbH		País Importador/ Importing Country: Germany	
Certificado Importação/ Importing Certificate: E 03078/2026		Certificado Exportação/ Exporting Certificate: EE/0178/2026	
Número de Autorização de Marketing (se aplicável)/ Marketing Authorisation Number (if applicable): PZN-19838220			
Condições de conservação/ Storage conditions: Manter a embalagem fechada, ao abrigo da luz e em ambiente seco. Conservar a temperatura inferior a 25°C. / Keep the package closed, away from light and in a dry environment. Keep in conditions below 25 °C.			
Fabricante/ Manufacturing Site: Blossom Genetics, Estrada do Contador 23, 2130-017 Benavente, Portugal (GMP Certificate Number: F084/S1/MH/001/2023, F084/S1/SA/001/2023). Laboratório de Análise/ Testing Site: Qplab Pharma Services, Tec Labs - Centro de Inovação da FCUL, 1749-016 Lisboa, Portugal (GMP Certificate Number: F067/S1/MG/001/2022); LEF - Rua das Ferrarias del Rei, n.º 6, 2730-269 Barcarena, Portugal (GMP Certificate Number: F032/S1/MH/001/2022).			
<b>Controlo Analítico/ Analytical Control</b>	<b>Documentação/ Documentation</b>	<b>Responsabilidade/R esponsability</b>	<b>Revisto/ Revised</b>
Os resultados analíticos (Raw data) estão disponíveis e foram revistos pelo Controlo de Qualidade/ Garantia da Qualidade confirmando que os resultados obtidos estão de acordo com limites definidos na especificação. / The analytical results (Raw data) are available and have been reviewed by Quality Control/Quality Assurance confirming that the results obtained are in accordance with the limits defined in the specification.	<b>Resultados de Controlo Qualidade/ Quality Control Results</b>	OP/QC/QA	<input checked="" type="checkbox"/>
O Certificado de Análise foi revisto pelo Quality Assurance Manager e encontra-se conforme a especificação. / The Certificate of Analysis was reviewed by the Quality Assurance Manager and is in accordance with specification.	N.º Certificado de Análise Blossom/ Blossom Certificate Analysis No.: CoA-274-00	QA/QP	<input checked="" type="checkbox"/>
Desvios revistos pela Garantia da Qualidade, se aplicável. / Deviations associated reviewed by Quality Assurance, if applicable.	Desvio(s) N.º/ Deviation(s) Nr. NA	QA	<input checked="" type="checkbox"/>
<b>Requisitos específicos / Specific Requirements</b>			
Verificação de requisitos específicos do cliente e do Quality Agreement Observações relevantes/ Verification of customer-specific requirements and the Quality Agreement/ Relevant observations: NA		QA	<input checked="" type="checkbox"/>
<b>Libertação de lote para cliente Batch release to client</b>			
<input checked="" type="checkbox"/> Aprovado/ Approved		<input type="checkbox"/> Rejeitado/ Rejected	
Certifico que as informações acima são autênticas e precisas. Este lote de produto foi fabricado, incluindo embalagem/rotulagem e controlo de qualidade no(s) local(is) acima mencionado(s) em total conformidade com os requisitos das BPF da Autoridade Reguladora Portuguesa (INFARMED) e com os requisitos da Autorização de Introdução no Mercado/ Registo do país importador. Os registos do processamento, embalagem e análise do lote foram revistos e considerados conformes com as BPF. I hereby certify that the above information is authentic and accurate. This batch of product has been manufactured, including packaging/labelling and quality control at the above mentioned site(s) in full compliance with the GMP requirements of the local Portuguese Regulatory Authority (INFARMED) and with the definitions in the Marketing Authorisation/ Registry of the importing country. The batch documentation regarding processing, packaging and quality control analysis records were reviewed and found to be in compliance with GMP.			
Qualified Person  Nome, data e assinatura/ Name, date and signature			

1. Este documento deverá ficar arquivado junto do Master Batch Record do lote / This document must be filed with the batch's Master Batch Record. Este FRM é preenchido após verificação da documentação de lote pelo QA (FRM-053-01) para atestar a libertação de lote para um cliente específico (confirmando que os requisitos acordados com o cliente foram cumpridos) / This FRM is completed after checking the batch documentation by QA (FRM-053-01) to certify the batch release for a specific customer (confirming that the requirements agreed with the customer have been met).

## DOCUMENT END

<b>R05</b>		
R00(Jan23) Creation; R01(Feb24) Document translation. Inclusion of the fields: Strength, Manufacturing date, Expiry date, Importing country, Marketing Authorization number, Manufacturing Site and Testing Site. R02(Feb24) Inclusion of the "Approved/Rejected" decision; R03(Jul24) Inclusion of the "Product name", "Product units released", "Label". Inclusion of "Documents Approvals". Inclusion of LEF as an Analysis Laboratory. Remove point 1 from the notes. R04(Aug24) inclusion GMP certificates of Blossom and external qualified laboratories. R05(Jan25) inclusion Import and Export certificates: General Layout revision to 1 page document;		
<b>DOCUMENT APPROVALS</b>		
Author Confirming the technical content of this document	Document Owner Confirming the technical content of this document	Quality Confirming compliance of this document with the Quality System
10/01/2025 Quality Assurance Manager	10/01/2025 Quality Compliance Manager	10-01-2024 Quality Assurance Director
Blossom Genetics, Lda Estrada do Contador, 23   2130-017 Benavente   Portugal		

**Betreff:***Subject*

WELLFORD LUMA 24/1 ZA SOC CANNABISBLÜTEN - 50g, Ch.-B.: 11708375002  
WELLFORD PEAK 30/1 CA T95 CANNABISBLÜTEN – 15g, Ch.-B.: 11712771002  
WELLFORD PEAK 30/1 CA T95 CANNABISBLÜTEN - 50g, Ch.-B.: 11712775002  
WELLFORD PEAK 33/1 CA PKM CANNABISBLÜTEN - 50g, Ch.-B.: 11710475003  
WELLFORD PEAK 33/1 CA PKM CANNABISBLÜTEN – 15g, Ch.-B.: 11710471003  
WELLFORD LUMA 26/1 ZA SOC CANNABISBLÜTEN – 15g, Ch.-B.: 11708371002

Vertriebsland: Deutschland

*Destination country: Germany***Sehr geehrte Damen und Herren,***To whom it may concern*

Hiermit zertifiziere ich, dass alle Herstellungsstufen dieser Fertigproduktchargen in voller Übereinstimmung mit den Anforderungen der Guten Herstellungspraxis der EU und mit den Anforderungen der Genehmigung(en) für das Inverkehrbringen im Zielland durchgeführt wurden.

*I hereby certify that all the manufacturing stages of this batches of finished products have been carried out in full compliance with the GMP requirements of the EU and with the requirements of the Marketing Authorisation(s) of the destination country.*

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Datum, Name und  
Unterschrift

*Date, name, and signature**/Sachkundige Person/**Qualified Person*