## Power of Attorney to Execute DEA Forms and Make Registration Changes

Registrant Name:		
Registered Location:		
<b>DEA Chain Renewal No:</b>		
on the behalf of the above-	, the undersigned, being authorized to sign the named registrant under the Controlled Substand hereby appoint the following individuals as tru- alf of the registrant to:	ces Act or Controlled Substances
	ns for Forms 222 and to sign orders for Schedul ectronic, in accordance with 21 U.S.C. 828 and egulations)	
<ol> <li>Modify, sign, and renew DEA registrations in accordance with 21 CFR (Code of Federal Regulations) 1301.13 (J)</li> </ol>		
I hereby ratify and confirm power of Attorney.	all lawful acts these attorneys-in-fact may carr	y out under the authority of this
Executed on this 14th	day of November , 2025	
Signature of Person Gran	ating Power: Mandless	
Witnesses:		
1. Signature: M. 38 A	Printed Name: Meliss	a A. Childs
2. Signature.	Printed Name: Annaya	Nigrelle
Attorneys in fact:		
Full Name	Signature of attorney-in-fact	Date Signed

This Power of Attorney is effective on the date above and remain in effect until revoked by me in writing. A copy shall be maintained at the registered location and made available for inspection upon request.		
Notice of Revocation – to be completed only when Power of Attorney is revoked		
The foregoing power of attorney is hereby revoked by the undersigned, who is authorized to sign the current DEA registration application for the above-named registrant. Written notice of this revocation has been provided to all attorneys-in-fact named above.		
Signature of Person Revoking Power:		
Printed Name:		
Witnesses to Revocation:		
1. Signature: Printed Name:		
2. Signature: Printed Name:		
Signed and dated on (current date).		