Mitchell Group USA, LLC
1 S.E. 3rd Avenue, suite 1860
Miami, FL, 33131
USA

Evaluation of Test Results	
Item Description:	**Neoprosone, Skin Brightening Cream**
TRF Number:	**TR178343370228362**
Supplier:	**Mitchell Group USA, LLC**
Sample Received Date:	**9/2/2026**
Issue Date:	**10/1/2026**
Revision Date:	**10/8/2026**
Expiration Date:	**10/8/2027**
Overall Rating: PASS	**Neoprosone, Skin Brightening Cream**



Label Verification: **PASS**
GMP Validation: **PASS**
FDA Facility Registration: **PASS**
FDA Product Listing: **PASS**
Microbiological Testing (USP 60/61/62): **PASS**
Heavy Metals Testing: **PASS**
Adulterants Testing: **PASS**

Signed for and on behalf of SGS North America, Inc.

Date: October 8, 2026

Aliyah Bobb
Regulatory Affairs Supervisor, Cosmetics & Hygiene

Prepared By:

Date: October 8, 2026

Mario Montes
Regulatory Affairs Associate GBS, Cosmetics & Hygiene

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Selling Partner Information:

Company Name:	Mitchell Group USA, LLC
Contact Information:	camille@mitchellgroupusa.com
ASIN Number:	B008P5E9M2
Manufacturer Name:	Mitchell Group USA, LLC
Manufacturer Address:	1 S.E. 3rd Avenue, suite 1860 Miami, FL, 33131 USA

Product Information:

Product Description:	Neoprosone, Skin Brightening Cream
Product Star Rating:	Not Listed
Star Rating Review Count:	Not Listed
Product Model:	N/A
Product Label:	
Methodologies Used:	Please see **MICROBIOLOGICAL AND ANALYTICAL REVIEW** section for details
Standards Product was Tested Against:	**U.S. Fair Packaging & Labeling Act (21 CFR 500 – 502)** **US Food, Drug & Cosmetic Act (21 CFR 700)** **The Tariff Act of 1930 (Country of Origin Marking; 19 CFR 134)** **Modernization of Cosmetics Regulation Act of 2022 (MoCRA; as part of the H.R.2617 - Consolidated Appropriations Act, 2023 [Subtitle E – Cosmetics]), Sec 609(a) LABELING – RESPONSIBLE PERSON**
Deviation Justification (if Applicable):	Client provided TR number

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Photo(s):

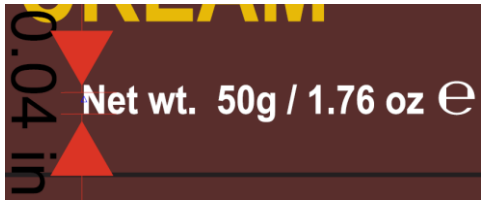
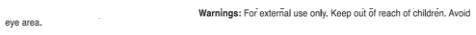


Side 1

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LABELING REVIEW				
Scope **PASS**	**Result**	**Present text on label**	**CORRECTIVE ACTION (Corrections marked in red)**	**COMMENTS (Reasons for changes) LEGISLATION**
Statement of Identity	**PASS**			
Statement of Responsibility Name and place of business of manufacturer, packer, or distributor	**PASS**	USA Distribution: 1 SE 3rd Ave Suite 1860 Miami, FL 33131 PH: 1 888 726 6211 I www.mitchellgroupinternational.com		
Brand Owner Details	**PASS**	USA Distribution: 1 SE 3rd Ave Suite 1860 Miami, FL 33131 PH: 1 888 726 6211 I www.mitchellgroupinternational.com		
Country of Origin	**PASS**	MADE IN INDIA FOR **MITCHELL GROUP**		

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SGS North America Inc. 291 Fairfield Ave., Fairfield, NJ 07004, USA **t** (973) 575-5252 **f** (973) 575-7175 www.us.sgs.com/cts

LABELING REVIEW				
Scope ***PASS***	***Result***	***Present text on label***	***CORRECTIVE ACTION (Corrections marked in red)***	***COMMENTS (Reasons for changes) LEGISLATION***
Net Quantity of Contents and its type size requirement	**NOT APPLICABLE**		If the PDP is > 5 but ≤ 25 sq in. then the type size for net weight needs to be at least 1/8 in. (0.125 in.) Type size is 0.04 in. PDP measures at 10.16 sq in.	21 CFR 701.13(i)(2): The declaration shall be in letters and numerals in a type size established in relationship to the area of the principal display panel of the package and shall be uniform for all packages of substantially the same size by complying with the following type specifications… …Not less than one-eighth inch in height on packages the principal display panel of which has an area of more than 5 but not more than 25 square inches.
Avoidable Hazards and Cautions	**PASS**		Risk assessment was not conducted as part of the label review. If any concerns for the safe use of the product exist, the proper warnings, hazards and cautions should appear.	
Directions for use	**PASS**			

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LABELING REVIEW				
Scope **PASS**	**Result**	**Present text on label**	**CORRECTIVE ACTION (Corrections marked in red)**	**COMMENTS (Reasons for changes) LEGISLATION**
Ingredient Listing	**NOT APPLICABLE**	**Ingredients:** Purified Water, Stearic Acid, Propylene Glycol, Glyceryl Monostearate, Glycerin, Isopropyl Myristate, Light Liquid Paraffin, Hydrogenated Castor Oil, Octyl Methoxy Cinnamate, Perfume, Phenoxyethanol PR, Sodium Benzoate, Arbutin, Sodium Sulfite, Titanium Dioxide, Lactic Acid, Allantoin, Disodium EDTA, Butylated Hydroxy Toluene, Zinc Oxide, Color CI 19140, CI 45100.	The following ingredients are not listed in UNII: • Lactic Acid • Octyl Methoxy Cinnamate • Phenoxyethanol PR The following INCI names are IMPROPER – • Light Liquid Paraffin • Butylated Hydroxytoluene • CI 19140 • CI 45100	The following INCI names are proper- • Light Mineral Oil • BHT • Acid yellow 23 • Acid Red 52 Please confirm the correct INCI name for the following ingredients from your supplier – • Octyl Methoxy Cinnamate
Claims Reviewed only to determine if claims are therapeutic, misleading, or illegal	**PASS**	sensitive/dry/normal skin		

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FDA REVIEW				
Scope **PASS**	**Result**	**Specification**	**CORRECTIVE ACTION (Corrections marked in red)**	**Document Reference**
FDA Registration REQUIREMENTS				
GMP Verification	**PASS**	Documentation of Good Manufacturing Practices from manufacturing facility according to ISO 22716:2007, NSF/ANSI 455-3 or equivalent. FDA Inspections are not considered a replacement for a GMP issuing body.		
Facility Registration	**PASS**	FDA Form 5066 must be provided and note expired.		
FDA Product Listing	**PASS**	FDA Form 5067 with product name and ingredients of ASIN must be provided.	The ingredient list on the 5067 forms does not match the ingredients on the packaging.	

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MICROBIOLOGICAL AND ANALYTICAL REVIEW				
Scope **PASS**	**Result**	**Specification**	**Standard/Method**	**Document Reference/ Report No.**
Microbial Limits Testing	**PASS**	≤1000 cfu/mL(g) - USP <60>,<61> Absence of specified organism (or negative) – USP <62>	USP 60/61/62	
Heavy Metals Testing	**PASS**	Mercury: < 1ppm Lead: < 5ppm Arsenic: < 3ppm Cadmium: < 3 ppm	OTHER	
Adulterants Testing	**PASS**	Hydroquinone: < 5ppm or ND Betamethasone dipropionate: < 5ppm or ND Betamethasone 17-valerate: < 5ppm or ND Betamethasone: < 5ppm or ND Clobetasol propionate: < 5ppm or ND Clotrimazole: < 5ppm or ND Halobetasol propionate: < 5ppm or ND Fluocinonide: < 5ppm or ND Fluocinolone: < 5ppm or ND Fluocinolone acetonide: < 5ppm or ND		

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MICROBIOLOGICAL AND ANALYTICAL REVIEW				
Scope	***Result***	***Specification***	***Standard/Method***	***Document Reference/ Report No.***
PASS				

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APPENDIX – GENERIC REMARK

(a) This evaluation is relevant solely to the conditions described herein. Any substitution of ingredients, increase in ingredient concentrations, or change in use pattern will necessitate a new evaluation.

(b) Results reported on the submitted product label/label artwork are on an as received basis.

(c) Ingredients checked for INCI name only.

(d) Only content in English was reviewed in the assessment.

(e) All claims on the label(s) shall be truthful and verifiable.

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Supporting Documentation:

Microbial Limits Results

Microbiological Parameters					
1	Total Aerobic Mesophilic Microbial Count	<10	Limit: Max. 1000	cfu /gm	USP<61>
2	Escherichia coli (E. coli)	Absent	Detection Limit 1	cfu /gm	USP<62>
3	Staphylococcus aureus	Absent	Detection Limit 1	per gm	USP<62>
4	Pseudomonas aeruginosa	Absent	Detection Limit 1	per gm	USP<62>
5	Candida albicans	Absent	Detection Limit 1	per gm	USP<62>

Sr. No	Parameters	Result	Specifications	Units	Method Used
6	Burkholderia cepacia complex	Absent	Detection Limit 1	per gm	USP<62>

OPINION: The opinion of the undersigned the sample **COMPLIES**/~~NOT COMPLIES~~ as per specification.

Note : 1. Results relate only to the items tested.
2. The results apply to the sample as received.
3. The report shall not be reproduced except in full without approval of the laboratory can provide assurance.
4. That parts of a report are not taken out of context.

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Heavy Metals Results

Heavy Metal Parameters					
1	Lead	Not Detected	Detection Limit 0.1	ppm	By ICPMS
2	Cadmium	Not Detected	Detection Limit 0.05	ppm	By ICPMS
3	Arsenic	Not Detected	Detection Limit 0.1	ppm	By ICPMS
4	Mercury	Not Detected	Detection Limit 0.05	ppm	By ICPMS

Adulterants Testing Results

Adulterant Testing					
1	Hydroquinone	Not Detected	Detection Limit 0.01	%	By GC-MS
2	Betamethasone dipropionate	Not Detected	Detection Limit 0.01	%	By GC-MS
3	Betamethasone 17-valerate	Not Detected	Detection Limit 0.01	%	By GC-MS

Sr. No	Parameters	Result	Specifications	Units	Method Used
4	Betamethasone	Not Detected	Detection Limit 0.01	%	By GC-MS
5	Clobetasol propionate	Not Detected	Detection Limit 0.01	%	By GC-MS
6	Clotrimazole	Not Detected	Detection Limit 0.01	%	By GC-MS
7	Halobetasol propionate	Not Detected	Detection Limit 0.01	%	By GC-MS
8	Fluocinonide	Not Detected	Detection Limit 0.01	%	By GC-MS
9	Fluocinolone	Not Detected	Detection Limit 0.01	%	By GC-MS
10	Fluocinolone acetonide	Not Detected	Detection Limit 0.01	%	By GC-MS

End of Report

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