CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS IGENOMIX USA LLC 7955 NW 12TH ST STE 415 MIAMI, FL 33126

CLIA ID NUMBER 10D2066797

EFFECTIVE DATE

06/03/2021

EXPIRATION DATE

06/02/2023

LABORATORY DIRECTOR

BRYNN LEVY Ph.D.

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



Monique Spruill, Director Division of Clinical Laboratory Improvement & Quality Quality & Safety Oversight Group Center for Clinical Standards and Quality

CERTS2 071321

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)

VIROLOGY (140) **ROUTINE CHEMISTRY (310)**

CYTOGENETICS (900)

EFFECTIVE DATE

04/14/2020 06/03/2019 12/04/2019 LAB CERTIFICATION (CODE)

EFFECTIVE DATE





FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER. PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE. CLIA ID Number: 10D2066797 IGENOMIX USA LLC 7955 NW 12TH ST STE 415 MIAMI, FL 33126

STATE AGENCY ADDRESS AND PHONE NUMBER:

STATE OF FL/AGENCY FOR HEALTH CARE ADMIN LABORATORY LICENSING UNIT 2727 MAHAN DR, MAIL STOP 32 TALLAHASSEE, FL 32308 (850)412-4500

LABORATORY MAILING ADDRESS: