

CLINICAL LABORATORY PERMIT



pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 37648

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

TISSUE PATHOLOGY

Cytogenetics

**IGENOMIX
BRYNN LEVY, PH.D.
30 MONTGOMERY STREET, SUITE 240
JERSEY CITY, NJ 07302**

Owner:

ISSUE DATE: August 15, 2022

DATE EXPIRES: August 15, 2023

**Denise Johnson MD, FACOG, FACHE
Secretary of Health**

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

IGENOMIX
BRYNN LEVY, PH.D.
30 MONTGOMERY STREET, SUITE 270
JERSEY CITY, NJ 07302