

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

Owner:

MENDEL BIDCO, S.L.U

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

Debra L. Bogen MD

**Debra L. Bogen, MD, FAAP
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 USA INC.
BRYNN LEVY, PH.D.
30 MONTGOMERY STREET, SUITE 270
JERSEY CITY, NJ 07302**