

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: 39839

Name and Director of Laboratory:

NEOGENOMICS LABORATORIES, INC ANAHIT NOWROUZI, M.D. 9490 NEOGENOMICS WAY FORT MYERS, FL 33912

Owner:

NEOGENOMICS LABORATORIES, INC

ISSUE DATE: August 15, 2024

DATE EXPIRES: August 15, 2025

AUTHORIZED CATEGORIES/TESTS:

CLINICAL CHEMISTRY NON-SYPHILIS SEROLOGY TISSUE PATHOLOGY

Debra L. Bogu MD

Debra L. Bogen, MD, FAAP Acting 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.

