

State of California Department of Public Health
CLINICAL LABORATORY CERTIFICATE OF DEEMED STATUS

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a certificate to operate a clinical laboratory at the indicated address or other site(s) on file with the department.

INTERPACE DIAGNOSTICS LAB, INC.
2 CHURCH STREET SOUTH, SUITE B-05
NEW HAVEN CT 06519

OWNER(S):

INTERPACE DIAGNOSTICS, LLC

DIRECTOR(S):

SYDNEY FINKELSTEIN MD

LAB ID Number:

CDS00800543

Effective Date:

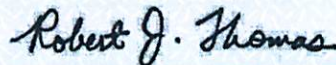
January 1, 2019

Valid Until:

December 31, 2019

CLIA Number:

07D1091103



Robert J. Thomas, Chief
Laboratory Field Services