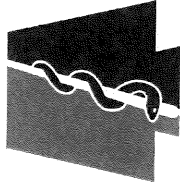


CLINICAL LABORATORY PERMIT



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: 33987

Name and Director of Laboratory:

ASHION ANALYTICS
JANINE LOBELLO
445 N. 5TH STREET, SUITE 468
PHOENIX, AZ 85004

Owner:

ASHION ANALYTICS, LLC

ISSUE DATE: August 15, 2017

DATE EXPIRES: August 15, 2018

AUTHORIZED CATEGORIES/TESTS:
CLINICAL CHEMISTRY



Karen M. Murphy Ph.D. RN
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.