

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 AUTHORIZED CATEGORIES/TESTS: CLINICAL CHEMISTRY

Name and Director of Laboratory:

ASHION ANALYTICS JANINE LOBELLO 445 N. 5TH STREET, 1ST FLOOR PHOENIX, AZ 85004

Owner:

ASHION ANALYTICS, LLC

ISSUE DATE: August 15, 2018

DATE EXPIRES: August 15, 2019

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Rachel L. Levine, MD 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.

