

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: 40133

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

TISSUE PATHOLOGY

Cytogenetics

**CENTOGENE US, LLC
PETER A BAUER, M.D.
99 ERIE ST
CAMBRIDGE, MA 02139**

Owner:

CENTOGENE LLC, US

ISSUE DATE: January 25, 2023

DATE EXPIRES: August 15, 2023

**Denise Johnson MD, FACOG, FACHE
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.