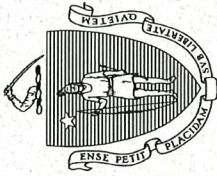


The Commonwealth of Massachusetts



DEPARTMENT OF

PUBLIC HEALTH

DIVISION OF HEALTH CARE FACILITY LICENSURE AND CERTIFICATION

CLINICAL LABORATORY LICENSE

In accordance with the provisions of the General Laws, Chapter 111D and regulations established thereunder, a license is hereby granted to

CLINICAL ENTERPRISE, LLC

NAME OF APPLICANT

175 CROSSING BOULEVARD, SUITE 400, FRAMINGHAM, MA 01702

ADDRESS OF APPLICANT

for the maintenance of

CLINICAL ENTERPRISE, LLC

NAME OF CLINICAL LABORATORY

175 CROSSING BOULEVARD, STE 400, FRAMINGHAM, MA 01702

ADDRESS OF CLINICAL LABORATORY

Classification: FULL

MICROBIOLOGY

Bacteriology
Virology

CLINICAL CHEMISTRY

Routine Chemistry

HEMATOLOGY

Other Hematology

5219

FACILITY NUMBER

LICENSE N^o 5219 is valid from July 20, 2024 to July 19, 2026 subject to revocation for cause.

COLLECTION STATIONS/SATELLITES

None

ROBERT GOLDSTEIN, MD, PhD, COMMISSIONER OF PUBLIC HEALTH

JULY 20, 2024

DATE ISSUED

POST CONSPICUOUSLY