

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: 38401

Name and Director of Laboratory:

SCIPHER MEDICINE ZORAN GATALICA, M.D. 8 DAVIS DRIVE, SUITE 2A DURHAM, NC 27709

Owner:

SCIPHER MEDICINE CORPORATION

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

AUTHORIZED CATEGORIES/TESTS: CLINICAL CHEMISTRY NON-SYPHILIS SEROLOGY

Debra L. Bogn MD

Debra L. Bogen, MD, FAAP 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.