



Dear Laboratory Director

Attached below is your clinical laboratory certificate.
Your certificate is void after the expiration date below.

Expiration Date: February 01, 2019

**ASSUREX HEALTH
6000 S MASON MONTGOMERY RD
MASON OH 45040-3706**

DISPLAY:

State law requires that the clinical laboratory certificate shall be conspicuously posted in the clinical laboratory.

**CHANGE OF LABORATORY NAME,
DIRECTOR, OWNER AND/OR ADDRESS:**

State law requires that the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors. **YOUR CERTIFICATE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE.**

You must submit a completed application for a new clinical laboratory certificate within those 30 days or cease engaging in clinical laboratory practice. Mail written notification and/or application to the address indicated below.

**CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
Laboratory Field Services, Facility Licensing Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403**

Thank you for your cooperation.

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<p>State of California Department of Public Health</p> <p>CLINICAL LABORATORY CERTIFICATE OF DEEMED STATUS</p> <p>In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a certificate to operate a clinical laboratory at the indicated address or other site(s) on file with the department.</p> <p>ASSUREX HEALTH 6000 SOUTH MASON-MONTGOMERY ROAD MASON OH 45040</p>	
<p>OWNER(S): ASSURE RX MYRIAD GENETICS INC.</p>	<p>DIRECTOR(S): NINA KING PHD ELKE GRASSMAN PHD</p>
<p>LAB ID Number: CDS00800292 Effective Date: February 2, 2018 Valid Until: February 1, 2019 CLIA Number: 36D1101772</p>	<p style="text-align: center;"><i>Robert J. Thomas</i></p> <hr/> <p>Robert J. Thomas, Chief Laboratory Field Services</p>