



State of Rhode Island and Providence Plantations
DEPARTMENT OF HEALTH
OFFICE OF FACILITIES REGULATION

This is to certify that VIROMED LABORATORIES (LAB CORP)
6101 BLUE CIRCLE DRIVE MINNETONKA MN 55343
License Number: LCO00465

is hereby authorized to conduct and maintain an Out of State Clinical Laboratory in conformity with RIGL C23-16.2 and the standards, rules and regulations prescribed thereunder. This license is subject to biennial renewal unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please call (401) 222-2566 for more information.

APPROVED SPECIALTY (IES)

**MICROBIOLOGY, Bacteriology, Mycology, Parasitology, Virology, DIAGNOSTIC IMMUNOLOGY, Syphilis Serology, General Immunology
IMMUNOHEMATOLOGY, ABO Group/Rh Type,**

A handwritten signature in black ink, appearing to read "Ray Rusin".

Ray Rusin
Chief, Office of Facilities Regulation

Expires: 12/30/2011

A handwritten signature in black ink, appearing to read "David R. Gifford".

David R. Gifford, MD, MPH
Director of Health

Issued: 09/07/2006