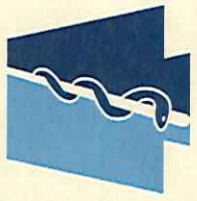


# CLINICAL LABORATORY PERMIT



**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: 33780

Name and Director of Laboratory:

VIROMED LABORATORIES INC.  
CHARLES P CARTWRIGHT, PH.D.  
1447 YORK COURT  
BURLINGTON, NC 27215

AUTHORIZED CATEGORIES/TESTS:

- BACTERIOLOGY
- IMMUNOHEMATOLOGY
- NON-SYPHILIS SEROLOGY
- PARASITOLOGY
- SYPHILIS SEROLOGY
- VIROLOGY

Owner:

VIROMED LABORATORIES INC.

ISSUE DATE: August 15, 2018

DATE EXPIRES: August 15, 2019

Rachel L. Levine, MD  
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.