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: 28151A

AUTHORIZED CATEGORIES/TESTS:
NON-SYPHILIS SEROLOGY

Name and Director of Laboratory:

CENETRON DIAGNOSTICS, LLC
MATTHEW W ANDERSON, M.D.
2111 WEST BRAKER LANE
SUITE 300
AUSTIN, TX 78758

Owner:

VERSITI WISCONSIN, INC.

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

Debra L. Bogen 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.

CENETRON DIAGNOSTICS, LLC
MATTHEW W ANDERSON, M.D.
2111 WEST BRAKER LANE
SUITE 300
AUSTIN, TX 78758