State of Tennessee

DEPARTMENT OF HEALTH

This Is To Certify, that a license is hereby granted by the Tennessee Department of Health to:

NEOGENOMICS LABORATORIES

Medical Laboratory Director JAMES C. MIXON, M.D.

Ownership Type CORPORATION

To conduct and maintain a Medical Laboratory in the Specialty (ies) of:

GENERAL IMMUNOLOGY (LIMITED)
CLINICAL CYTOGENETICS

On the premises located at 618 GRASSMERE PARK DR STE 20, NASHVILLE, TN 37211-3677

County of DAVIDSON

This license shall expire JANUARY 31 2025

This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.C.A. Section 58-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued thereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State this 23RD day of JANUARY 2024.

By [Signature]
ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

By [Signature]
CHAIRMAN, MEDICAL LABORATORY BOARD

By [Signature]
COMMISSIONER, DEPARTMENT OF HEALTH