

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: 36460

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

CLINICAL CHEMISTRY NON-SYPHILIS SEROLOGY

INTRINSICDX
WILLIAM B. PAXTON, M.D.
505 COAST BLVD. SOUTH, SUITE 408
LA JOLLA, CA 92037

Owner:

INTRINSIC LIFESCIENCES LLC/ EILEEN WESTERMAN

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

022 200

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.