

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: 30563A

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

**EXFOLIATIVE CYTOLOGY
TISSUE PATHOLOGY**

**AMERIPATH SOUTH FLORIDA INC
CARLOS NOUSARI
895 S W 30TH AVENUE SUITE 101
POMPANO BEACH, FL 33069**

Owner:

AMERIPATH INC

ISSUE DATE: August 15, 2022

DATE EXPIRES: August 15, 2023

**Denise Johnson MD, FACOG, FACHE
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.

**AMERIPATH SOUTH FLORIDA INC
CARLOS NOUSARI
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POMPANO BEACH, FL 33069**