

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: 26248A AUTHORIZED CATEGORIES/TESTS: TISSUE PATHOLOGY

Name and Director of Laboratory:

AMERIPATH NEW YORK LLC DBA DERMPATH DIAGNOTICS JASON A. COHEN, M.D. 1133 WESTCHESTER AVE, SUITE 331 WHITE PLAINS, NY 10604

Owner:

AMERIPATH INC

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

Debra L. Bogu 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.

