CLINICAL AND PUBLIC HEALTH LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address.

STRATA PATHOLOGY SERVICES INC

ONE CRANBERRY HILL, SUITE 303,
LEXINGTON, MA 02421

STATE ID: CDS-00800237
SCAN QR CODE TO VERIFY LICENSE
OR VISIT: www.cdph.ca.gov/LFS

EFFECTIVE DATE: 04/23/2020
EXPIRATION DATE: 04/22/2021

LICENSE TYPE:
CLINICAL LABORATORY LICENSE
CERTIFICATE OF DEEMED STATUS

CLIA ID: 22D1043442

OWNER/S:
STRATA PATHOLOGY SERVICES, INC.
LISA COHEN, M.D.
DERMATOPATHOLOGY EXPERTS, LLC
STRATA/WLA INTERMEDIATE HOLDING CORP.
BPA HOLDING CORP

DIRECTOR/S:
COHEN, LISA

DISPLAY: State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:
State law requires that the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors.
YOUR LICENSE MAY BE REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE.
If your license is revoked, you must cease engaging in clinical laboratory practice and apply for a new clinical laboratory license.
To make these changes or to submit a new application, visit our website: https://www.cdph.ca.gov/LFS *(Go to Clinical Laboratory Facilities)*

Robert J. Thomas
ROBERT J. THOMAS
BRANCH CHIEF
LABORATORY FIELD SERVICES

LABCERT 300 (05-2019)