The Commonwealth of Massachusetts

DEPARTMENT OF

PUBLIC HEALTH

DIVISION OF HEALTH CARE FACILITY LICENSURE AND CERTIFICATION

CLINICAL LABORATORY LICENSE

In accordance with the provisions of the General Laws, Chapter 111D and regulations established thereunder, a license is hereby granted to

STRATA PATHOLOGY SERVICES INC

NAME OF APPLICANT

ONE CRANBERRY HILL, LEXINGTON, MA 02421 ADDRESS OF APPLICANT

for the maintenance of

STRATA PATHOLOGY SERVICES INC DBA STRATADX

NAME OF CLINICAL LABORATORY

ONE CRANBERRY HILL, LEXINGTON, MA 02421

ADDRESS OF CLINICAL LABORATORY

Classification: FULL

<u>Pathology</u> Histopathology Oral Pathology

LICENSE Nº <u>5174</u> is valid from <u>March 9, 2023</u> to <u>March 8, 2025</u> subject to revocation for cause.

COLLECTION STATIONS/SATELLITES

None

Margin 40 one

MARGRET R. COOKE, COMMISSIONER OF PUBLIC HEALTH <u>MARCH 9, 2023</u> DATE ISSUED

POST CONSPICUOUSLY

5174

FACILITY NUMBER