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: 034283

AUTHORIZED CATEGORIES:

NON-SYPHILIS SEROLOGY

Name and Director of Laboratory:

GENESYS BIOLABS SUZANA RADULOVIC-BALA, MD 9430 KEY WEST AVE. SUITE 100 ROCKVILLE, MD 20850

Owner:

JONATHAN COHEN, CEO

ISSUE DATE: April 20, 2015

DATE EXPIRES: August 15, 2016

Karen Mr. Murphy, PhD. R.

Karen M. Murphy Ph.D. RN 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.