

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: 34579

Name and Director of Laboratory:

**CENTOGENE GMBH
PETER BAUER, M.D.
AM STRANDE 7
ROSTOCK, GERMANY 18055**

AUTHORIZED CATEGORIES/TESTS:

**CLINICAL CHEMISTRY
HEMATOLOGY
NON-SYPHILIS SEROLOGY
TISSUE PATHOLOGY**

Owner:

CENTOGENE GMBH

ISSUE DATE: May 10, 2024

DATE EXPIRES: August 15, 2025

Debra L. Bogen 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.

**CENTOGENE GMBH
PETER BAUER, M.D.
AM STRANDE 7
ROSTOCK, GERMANY 18055**