

# 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: 35262

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

TISSUE PATHOLOGY

Cytogenetics

NEOGENOMICS LABORATORIES, INC  
JOHN R. MCGILL, PH.D.  
13005 NORTH TELECOM PARKWAY, SUITE 104  
TEMPLE TERRACE, FL 33637

Owner:

NEOGENOMICS, INC

ISSUE DATE: August 15, 2025

DATE EXPIRES: August 15, 2026

*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.