

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: 39215

AUTHORIZED CATEGORIES/TESTS:

TISSUE PATHOLOGY

Histopathology

Name and Director of Laboratory:

PRELUDE DX PENNSYLVANIA DAVID J. DABBS, M.D. 6310 ALLENTOWN BLVD, SUITE 107 HARRISBURG, PA 17112

Owner:

PRELUDE CORPORATION

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

Debra L. Bogu MD

Debra L. Bogen, MD, FAAP 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.

