

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: 31445 AUTHORIZED CATEGORIES/TESTS: HEMATOLOGY

Name and Director of Laboratory:

ILLUMINA CLINICAL SERVICES LAB AKANCHHA KESARI, PH.D. 5200 ILLUMINA WAY SAN DIEGO, CA 92122

Owner:

**ILLUMINA INC** 

ISSUE DATE: August 15, 2024

**DATE EXPIRES: August 15, 2025** 

Debra L. Bogu 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.

