

# 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: 29454A

AUTHORIZED CATEGORIES/TESTS:  
TISSUE PATHOLOGY

Name and Director of Laboratory:

BIOREFERENCE HEALTH, LLC  
ZHIXIONG XU, PH.D.  
201 PERRY PARKWAY, SUITE 5  
GAITHERSBURG, MD 20877

Owner:

OPKO HEALTH, INC.

ISSUE DATE: August 15, 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.**