



Dear Laboratory Director:

Attached below is your clinical laboratory license.
Your license is void after the expiration date below.

Expiration Date: September 30, 2012

NEOGENOMICS LABORATORIES
ATTN: COMPLIANCE DEPT.
12701 COMMONWEALTH DR STE 9
FR. MYERS FL 33913

DISPLAY:

State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME,

DIRECTOR, OWNER AND/OR ADDRESS:

State law requires that you notify this office WITHIN 30 DAYS of any change in ownership, name, location or laboratory directors. YOUR LICENSE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE OCCURS. Mail written notification of the above changes to the address indicated below:

California Department of Public Health
Laboratory Field Services, Facility Licensing Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Lab 142 Labclin (9-11)

Tear Here

Tear Here

State of California Department of Public Health
CLINICAL LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address or other site(s) on file with the department.

NEOGENOMICS LABORATORIES
6 MORGAN, SUITE #150
IRVINE CA 92618

OWNER(S):

NEOGENOMICS, INC
CEDE & CO
STEVEN CHARLES JONES
MICHAEL THOMAS DENT
ASPEN CAPITAL
ROBERT GASPARINI

DIRECTOR(S):

SALLY A. AGERSBORG MD

Lab ID Number: CLF 00335014

Effective Date: October 1, 2011

Valid Until: September 30, 2012

CLIA Number: 05D1065194

Beatrice O'Keefe

Beatrice R. O'Keefe, Division Chief
Laboratory Field Services