State of Tennessee



Dicense No. 0000004061

COMMISSIONER, DEPARTMENT OF HEALTH

DEPARTMENT OF HEALTH

DEI AITTIVILITI OI LILALITI
This Is To Certify, that a license is hereby granted by the Tennessee Department of Health to:
NEOGENOMICS LABORATORIES
Hedical Laboratory Director JAMES C. MIXON, M.D.
Ownership Type CORPORATION
To conduct and maintain a Medical Laboratory in the Specialty (ies) of:
GENERAL IMMUNOLOGY (LIMITED) CLINICAL CYTOGENETICS
(ii) 40 1 0 4 / 4 619 CDASSMEDE DADY DD STE 20 NASHVILLE TN 27211 2677
On the premises located at 618 GRASSMERE PARK DR STE 20, NASHVILLE, TN 37211-3677 Country of DAVIDSON
Country ofDAVIDSON This license shall expireJANUARY 312025 .
This license shall be displayed in a conspicuous place where it may be viewed by the public.
The holder of this license is subject to the provisions of T.C.A. Section 68-29-111 and
regulations thereto. This license shall not be assignable or transferable and shall be
subject to revocation at any time by the State Department of Health for failure to comply
with the laws of the State of Tennessee or the rules and regulations of the State Department
of Health issued thereunder.
In Witness Whereof, we have hereunto set our hand and seal of the State
this 23RD day of JANUARY 2024.
By Junifu 1. Rothang Erg Assistant commissioner, Health Licensure & regulation
0000000
By Surish Widsomb MT (ASCE) By Statille
CHAIRMAN, MEDICAL LABORATORY BOARD COMMISSIONER DEPARTMENT OF HEALTH