

# 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: 35847**

**Name and Director of Laboratory:**

**OMNISEQ, INC.  
ZHANG SHENGLE, M.D. M.S.  
700 ELLICOTT STREET  
BUFFALO, NY 14203**

**AUTHORIZED CATEGORIES/TESTS:**

**NON-SYPHILIS SEROLOGY**

**TISSUE PATHOLOGY**

Cytogenetics  
Histopathology

**Owner:**

**LABORATORY CORPORATION OF AMERICA HOLDINGS**

**ISSUE DATE: August 15, 2023**

**DATE EXPIRES: August 15, 2024**

*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.**

**OMNISEQ, INC.**  
**ZHANG SHENGLE, M.D. M.S.**  
**700 ELLICOTT STREET**  
**ATTN: OMNISEQ LABORATORY**  
**BUFFALO, NY 14203**