

The Commonwealth of Massachusetts

DEPARTMENT OF



PUBLIC HEALTH

DIVISION OF HEALTH CARE FACILITY LICENSURE AND CERTIFICATION

CLINICAL LABORATORY LICENSE

In accordance with the provisions of the General Laws, Chapter 111D and regulations established thereunder, a license is hereby granted to

VARIANTYX, INC.

NAME OF APPLICANT

1671 WORCESTER RD, STE 300, FRAMINGHAM, MA 01701

ADDRESS OF APPLICANT

for the maintenance of

VARIANTYX, INC.

NAME OF CLINICAL LABORATORY

1671 WORCESTER RD, STE 300, FRAMINGHAM, MA 01701

ADDRESS OF CLINICAL LABORATORY

5438

FACILITY NUMBER

Classification: **FULL**

Clinical Chemistry

Routine Chemistry

LICENSE N^o 5438 is valid from February 13, 2022 to February 12, 2024 subject to revocation for cause.

COLLECTION STATIONS/SATELLITES

None

Handwritten signature of Margaret R. Cooke in black ink.

MARGRET R. COOKE, COMMISSIONER OF PUBLIC HEALTH

FEBRUARY 13, 2022

DATE ISSUED

POST CONSPICUOUSLY