

CLINICAL AND PUBLIC HEALTH 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.

MOSAIC LABORATORIES, LLC

LAKE FOREST, CA 92630-2244 80 EMPIRE DR,



STATE ID: (DF-00334587 SCAN OR CODE TO VERIFY LICENSE OR VISIT: www.cdph.ca.gov/LFS

EXPIRATION DATE: 07/30/2024 EFFECTIVE DATE: 07/31/2023

OWNER/S:

MOSAIC LABORATORIES, LLC

LICENSE TYPE:

CERTIFICATE OF DEEMED STATUS CLINICAL LABORATORY LICENSE

DIRECTOR/S:

JAMES A THOMPSON MD

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 the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors. To make these changes or to submit a new application, visit our website: https://www.cdph.ca.gov/LFS (Go to Laboratory Facilities) If your license is revoked, you must cease engaging in clinical laboratory practice and apply for a new laboratory license. If this office is not notified, your license may be revoked 30 days after major Owner and/or Director change.

ROBERT J. THOMAS
BRANCH CHIEF LABORATORY FIELD SERVICES