

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: 33853

AUTHORIZED CATEGORIES/TESTS:
CLINICAL CHEMISTRY

Name and Director of Laboratory:

MOLECULAR VISION LABORATORY
JOHN CHIANG
1920 NE STUCKI AVE., SUITE 150
HILLSBORO, OR 97006

Owner:

CENTRILLION TECHNOLOGIES INC (MAJORITY); JOHN
CHIANG

ISSUE DATE: August 15, 2019

DATE EXPIRES: August 15, 2020

Rachel L. Levine, MD
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.