

STATE OF GEORGIA CLINICAL LABORATORY LICENSE

This is to certify that a license is hereby granted to	NORTH SHORE MEDICAL LABS, INC
	(Name of Governing Body)
to maintain and operate a Clinical Laboratory located at	1719 RUSSELL PARKWAY, SUITE 700; WARNER ROBINS, GA 31088
	(Address)
named as	NORTH SHORE MEDICAL LABS
	(Name of Facility)
Pursuant to the terms of the Georgia Clinical Laboratory Licensure Law (Georgia Laws of 1970, p. 531 as amended), the above names facility is hereby licensed to function as a clinical laboratory, at address shown, for purposes of performing tests in the following categories or subcategories of procedures:	
SPECIMEN COLLECTION STATIONS- 1719 RUSSELL PKWY STE 700, WARNER ROBINS, GA 31088	
This license is effective and remains in effect unless revoked or suspended. This permit is granted persuant to the authority vested in the Department of	
Community Health, official code of Georgia, Title 31, Chapter 5, and signifies that the provider complies with the Rules and Regulations of the Department of Community Health on the date this license was issued.	
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Laboratory Director: ALI CHAUDHRI	License number: 076-012
GEORGIA DEPARTMENT OF COMMUNITY HEALTH	HEALTHCARE FACILITY REGULATION DIVISION
This license is not transferable	
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	Melanie Simon
	Melanie Simon, Division Chief