

State of Tennessee



License No. 0000004219

DEPARTMENT OF HEALTH

This I, Do Verify, that a license is hereby granted by the Tennessee Department of Health to:
MEDIC REGIONAL BLOOD CENTER FARRAGUT

Medical Laboratory Director THOMAS C. WATKINS, D.O.

Owner CORPORATION

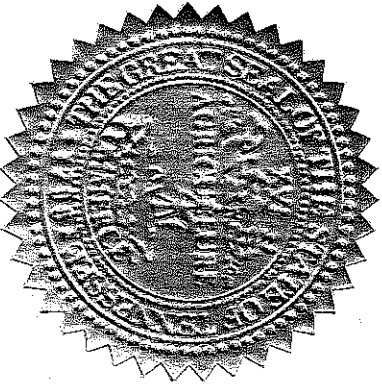
To conduct and maintain a Medical Laboratory in the Specialty (ies) of:
HEMATOLOGY (LIMITED)
BLOOD BANK DONOR CENTER
PLATELET PRE-COUNT

On the premises located at 11000 KINGSTON PK STE 9, KNOXVILLE, TN 37934-2870
County of KNOX

This license shall expire JANUARY 31 2016.

This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.C.R.C. Section 58-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued hereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State
this 9TH day of JANUARY 2015.



By Cheryl S. Smith
CHAIRMAN, MEDICAL LABORATORY BOARD

By Genevieve OTH
DIRECTOR, HEALTH RELATED BOARDS