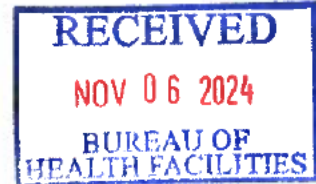


STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF OPERATIONS SUPPORT
HEALTH FACILITIES ADMINISTRATION
129 Pleasant Street, Concord, NH 03301
TDD Access: Relay NH 1-800-735-2964
Agency Phone: 603-271-9039



APPLICATION FOR RESIDENTIAL AND OR HEALTH CARE LICENSE
(LABORATORIES AND COLLECTING STATIONS)

LICENSE #: _____ EXPIRATION DATE: _____

This application shall be filled out in accordance with RSA 151:4. A separate application must be submitted for each licensure category. **Please be sure to complete the entire application.** If a section does not apply to your facility mark not applicable (n/a). Failure to complete the application will result in a delay in the licensure process. Send the completed form to the address above. Check all applicable items:

License renewal: *New administrator: *New facility:
**New facility name: *New owner: *Change in # of beds:
*Change in classification: *Change in address: Other (please explain):

- * Requires processing as a new application.
*If a new facility, please submit directions to your location, from Concord, with your application.
- ** May require processing as a new application.

Licensee: Laboratory Corporation of America Holdings Telephone #: (508) 958-9374
(same name as ownership)

Name of Facility: Labcorp/Altrix Primary Care Telephone #: (603) 821-4009

E-Mail: RNQuality@labcorp.com Fax #: (603) 821-4039

Street Address: 57 Northeastern Blvd. City: Nashua State: NH Zip: 03062

Mailing Address: 183 Rockingham Road City: Windham State: NH Zip: 03087

Administrator: Amber Cuthbertson

Laboratory Director (If Applicable): N/A

Facility E-Mail Address cuthbea@labcorp.com ; RNQuality@labcorp.com

Days And Hours Of Operation: Monday, Tuesday and Friday 7:30am-2:30pm ; Thursday 12:00pm-5:00pm; closed Wednesday, Sat and Sun

OWNERSHIP

a. Type of ownership: Association: Partnership:
Corporation: Other (explain):
Individual: Limited Liability Co.

Please provide the following information or attached copies of documents.

- b. List name and address of each person having an ownership interest (directly or indirectly) of greater than 5% in the facility.
See Attachment A
- c. If the licensee is organized as an association, corporation or limited liability company (LLC) list the name of the corporation or association and the name, address and title of each officer.
See Attachment B
- d. If the licensee is a partnership, list the name(s) and address(es) of all the partners.

FEES: (EFFECTIVE JULY 1, 2009)

Collecting Stations	\$250.00 per year
Laboratories	\$150.00 per category of testing

Payable in cash, or if paid by check or money order, in the exact amount of the fee payable to "STATE OF NEW HAMPSHIRE, TREASURER", must be attached to this application.

APPLICATION FOR NEW LICENSE

1. Be submitted at least 120 days prior to opening the new facility.
2. Submit a floor plan of the facility.
3. Attach a resume identifying the qualifications, including education, experience and copies of all applicable licenses for the administrator or laboratory director.
4. If applicable, proof of authorization from the New Hampshire secretary of state to do business in New Hampshire in the form of one of the following:
 - a. "Certificate of Authority," if a corporation;
 - b. "Certificate of Formation," if a limited liability company; or
 - c. "Certificate of Trade Name," if a sole proprietorship;
5. The results of a criminal records check for the applicant, the licensee, if different than the applicant, the laboratory director, and the administrator, as applicable. The results must include criminal history from the state of New Hampshire.
6. Documentation that the water supply has been tested in accordance with RSA 485 and Env-Dw 702.02 and Env-Dw 704.04 or copy of water bill.

APPLICATION FOR LICENSE RENEWAL SHALL:

1. Be submitted at least 120 days prior to expiration of the current license.
2. Documentation that the water supply has been tested in accordance with RSA 485 and Env-Dw 702.02 and Env-Dw 704.04 or copy of water bill. Submit with initial application or every 3 years.
3. Attach qualifications, including education, experience, and copies of all applicable licenses for the administrator, medical director, or laboratory director (if applicable).
4. Include information relative to whether the facility has been granted any waiver and/or exemptions to the rules by the Commissioner of the Department of Health and Human Services and/or the State Fire Marshal.
5. A list of all employees who have received criminal background waivers from the Department of Health and Human Services. (Annual)

FACILITY SERVICE DESCRIPTION:

The following information will be used to determine which licensure category your facility shall be placed in.

I. Provide a detailed description of the services you wish to provide.

Collection Station

II. Please indicate which laboratory categories you will be testing:

- Microbiology
- Chemistry
- Immunohematology
- Radiobiassassay
- Diagnostic immunology
- Hematology
- Pathology
- Clinical cytogenetics

SIGNATURES:

This application must be signed by:

1. The owner if a private facility;
2. 2 officers if a corporation;
3. 2 authorized individuals if an association or partnership;
4. The head of the government department if a government unit.

I affirm that I am familiar with the requirements of RSA 151 and the rules adopted thereunder and that the premises are in full compliance. I understand that providing false information shall be grounds for denial, suspension, or revocation of a license, or imposition of a fine.

Date: 10-25-2024 Signed: Michael Cervenak Vice President
(Name and Title)

Michael Cervenak, Vice President
Print Name and Title

Date: 10-28-2024 Signed: Kevin Kennedy
(Name and Title)

Kevin Kennedy, Vice President
Print Name and Title

CHECK NUMBER: 0102603308

AMOUNT: \$250.00

APPLICATION COMPLETE: _____

NOT COMPLETE: _____
(Describe in comments)

Local Approval:	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
LSC Inspection:	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
LSC Plan of Correction:	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
Licensure Inspection:	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
Plan of Correction:	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
Water Testing Information	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>
Floor Plan	Required	<input type="checkbox"/>	Not Required	<input type="checkbox"/>	Received	<input type="checkbox"/>

Federal Facility (Exempt From Inspection) YES NO

LICENSURE CATEGORY:

- 17 Collecting Station
- 08 Laboratory

Reviewed By: _____
(Name & Title) (Date)

Issue Annual License: YES _____ NO _____

License Certificate Dates: From _____ To _____

Notes:

Comments On Certificate:

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH & HUMAN SERVICES
Bureau of Licensing and Certification
HEALTH FACILITIES ADMINISTRATION
129 Pleasant Street, Concord, New Hampshire 03301-3857
TDD Access: Relay NH 1-800-735-2964
Agency Phone Number: 603-271-9039**

- Initial Licensing – This includes a change in ownership or address other than a 911 change
- A change in current licensing category
- New Construction and/or Renovation of Existing Building
- An increase in occupancy (ie: Beds, ESRD Stations or Clients)

Please note: All applicants must have each final inspection signed by local officials, even if they do not see clients at their place of business. This is to confirm that the local authorities are aware that a business is operating at the identified location and that the business complies with all local ordinances pursuant to RSA 151:4,III(3).

Please note: Applicants that are planning new construction, modifying/renovating or requesting a bed increase that involves modifications to the building must have both the plan review sections as well as the final inspection sections of the form completed and signed by building and fire officials.

FACILITY NAME: LAB CORP
 STREET ADDRESS: ALTRIA 57 NORTHEASTERN BLVD NASHUA NH 03062
 OWNERS'S NAME: _____
 ADMINISTRATOR NAME: AMBER CUTHBERTSON
 TELEPHONE NUMBER: _____
 PROPOSED TYPE OF FACILITY: TOP COLLECTION STATION
 Local authorities please complete and sign each section:

HEALTH OFFICER

I HEREBY CERTIFY THAT THE ENTITY LAB CORP COMPLIES WITH ALL APPLICABLE HEALTH, SEWAGE AND WATER REGULATIONS FOR THE CITY/TOWN OF NASHUA.

I HEREBY CERTIFY THAT THE CITY/TOWN OF 6 DOES NOT REQUIRE HEALTH, SEWAGE AND WATER APPROVAL OF THIS FACILITY/ESTABLISHMENT.

NUMBER OF BEDS/CLIENTS: 0

FINAL INSPECTION: DATE: 0 SIGNATURE: [Signature] **HEIDI PECK-KUKULKA, HEALTH OFFICER**
 (NAME AND TITLE OF HEALTH OFFICIAL)

BUILDING REGULATIONS

I HEREBY CERTIFY THAT THE CITY/TOWN OF NASHUA BUILDING DEPARTMENT HAS REVIEWED THE PLANS FOR APPROVED LAB CORP ON 8/14/24 APPROVED DENIED

PLAN REVIEW: DATE: _____ SIGNATURE: [Signature] **M. COLLINS PLANS EXAMINER**
 (NAME AND TITLE OF BUILDING OFFICIAL)

I HEREBY CERTIFY THAT THE CITY/TOWN OF _____ BUILDING DEPARTMENT HAS INSPECTED _____ ON _____ AND OBSERVED THE FOLLOWING VIOLATIONS:

I HEREBY CERTIFY THAT THE CITY/TOWN OF _____ BUILDING DEPARTMENT HAS INSPECTED _____ ON _____ AND ALL PREVIOUS VIOLATIONS HAVE BEEN CORRECTED.

I HEREBY CERTIFY THAT THE CITY/TOWN OF _____ BUILDING DEPARTMENT HAS INSPECTED _____ ON _____ AND FOUND NO VIOLATIONS OF THE BUILDING CODE.

I HEREBY CERTIFY THAT THE CITY/TOWN OF _____ DOES NOT HAVE LOCAL BUILDING CODES OR REGULATIONS.

NUMBER OF BEDS/CLIENTS: N/A

FINAL INSPECTION: DATE: _____ SIGNATURE: _____
(NAME AND TITLE OF BUILDING OFFICIAL)

ZONING REGULATIONS

I HEREBY CERTIFY THAT THE ENTITY LabCo, p COMPLIES WITH ALL APPLICABLE ZONING REGULATIONS FOR THE CITY/TOWN OF Nashua NH.

I HEREBY CERTIFY THAT THE CITY/TOWN OF _____ DOES NOT HAVE LOCAL ZONING REGULATIONS.

NUMBER OF BEDS/CLIENTS: _____

FINAL INSPECTION: DATE: _____ SIGNATURE: [Signature] zoning coordinator
(NAME AND TITLE OF ZONING OFFICIAL)

FIRE REGULATIONS

THIS CITY/TOWN USES THE FOLLOWING FIRE CODES: (EXAMPLE NFPA 101 CHAPTER 39)

I HEREBY CERTIFY THAT THE CITY/TOWN OF Nashua FD HAS REVIEWED THE PLANS FOR 57 Northeastern Blvd ON 10/24/24 APPROVED DENIED

PLAN REVIEW: DATE: 10/24/24 SIGNATURE: Jeff Labrie
(FIRE CHIEF OR DESIGNEE)

I HEREBY CERTIFY THAT THE CITY/TOWN OF Nashua FD HAS INSPECTED 57 Northeastern Blvd ON 8/19/24 AND OBSERVED THE FOLLOWING VIOLATIONS:

Numerous fire rated doors were propped open. All doors need to have a magnet installed. Fire alarm inspection report required.
Fire sprinkler inspection report required.

I HEREBY CERTIFY THAT THE CITY/TOWN OF Nashua FD HAS INSPECTED N/A ON N/A AND ALL PREVIOUS VIOLATIONS HAVE BEEN CORRECTED.

I HEREBY CERTIFY THAT THE CITY/TOWN OF Nashua FD HAS INSPECTED N/A ON N/A AND FOUND NO VIOLATIONS OF THE STATE AND/OR LOCAL MUNICIPAL FIRE CODE.

NUMBER OF BEDS/CLIENTS: N/A

FINAL INSPECTION: DATE: 10/24/24 SIGNATURE: Jeff Labrie
(FIRE CHIEF OR DESIGNEE)

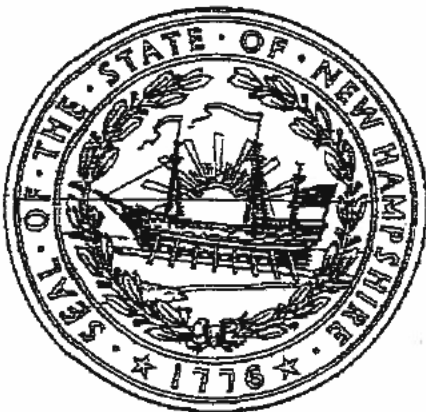
State of New Hampshire
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that LABORATORY CORPORATION OF AMERICA HOLDINGS is a Delaware Profit Corporation registered to transact business in New Hampshire on August 11, 1995. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 233650

Certificate Number: 0006103698



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 2nd dzy of February A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan
Secretary of State

ATTACHMENT A

LABORATORY CORPORATION OF AMERICA HOLDINGS

The stock of Laboratory Corporation of America Holdings (TIN 13-3757370), 358 South Main Street, Burlington North Carolian 27215, is traded on the New York Stock Exchange (LH). The US beneficial owners of Laboratory Corporation of America Holdings who own more than five percent (5%) of the stock thereof are identified below:

1. Vanguard Group, Inc.
100 Vanguard Blvd.
Malvern, PA 19355
Federal Tax ID #23-1945930

As of September 30, 2023 Vanguard Groups' ownership interest in Laboratory Corporation of America Holdings consists of 10,153,889 shares, or 11.96% of common stock.

2. Black Rock Institutional Trust Company, N.A.
400 Howard Street
San Francisco, CA 94105
Federal Tax ID #94-3112180

As of September 30, 2023 Black Rock Institutional Trust Company's ownership interest in Laboratory Corporation of America Holdings consists of 5,049,996 shares, or 5.95% of common stock.

ATTACHMENT B

LABORATORY CORPORATION OF AMERICA HOLDINGS

BOARD OF DIRECTORS

Adam H. Schechter, Chairman	358 South Main Street, Burlington, North Carolina 27215
Kerri B. Anderson	358 South Main Street, Burlington, North Carolina 27215
Jean-Luc Bélingard	358 South Main Street, Burlington, North Carolina 27215
Jeffrey A. Davis	358 South Main Street, Burlington, North Carolina 27215
D. Gary Gilliland, M.D., Ph.D.	358 South Main Street, Burlington, North Carolina 27215
Kirsten M. Kliphouse	358 South Main Street, Burlington, North Carolina 27215
Garheng Kong, M.D., Ph.D.	358 South Main Street, Burlington, North Carolina 27215
Peter M. Neupert	358 South Main Street, Burlington, North Carolina 27215
Richelle P. Parham	358 South Main Street, Burlington, North Carolina 27215
Paul B. Rothman	358 South Main Street, Burlington, North Carolina 27215
Kathryn E. Wengel	358 South Main Street, Burlington, North Carolina 27215
R. Sanders Williams, M.D.	358 South Main Street, Burlington, North Carolina 27215

OFFICERS

Adam H. Schechter	President and Chief Executive Officer
Lance V. Berberian	Executive Vice President and Chief Information Officer
Megan D. Bailey	Executive Vice President and Chief Strategy and Transformation Officer
Brian J. Caveney	Executive Vice President and President of Early Development Research Laboratories and Chief Medical and Scientific Officer
Jonathan P. DiVincenzo	Executive Vice President and President of Central Laboratories and International
Glenn A. Eisenberg	Executive Vice President and Chief Financial Officer
Anita I. Graham	Executive Vice President and Chief Human Resources Officer
Miranda Johnson	Assistant Secretary
Thomas J. Kremer	Senior Vice President and Treasurer
Kathryn W. Kyle	Senior Vice President and Assistant Secretary
Mark S. Schroeder	Executive Vice President and President of Diagnostics Laboratories and Chief Operations Officer
Amy B. Summy	Executive Vice President and Chief Marketing Officer
John L. Treadwell	Vice President and Assistant Secretary
Sandra D. van der Vaart	Executive Vice President, Chief Legal Officer, Chief Compliance Officer and Secretary

**LABORATORY CORPORATION OF AMERICA HOLDINGS
OFFICIAL LIST OF AUTHORIZED SIGNERS**

Executive Officers:

Adam H. Schechter	President and Chief Executive Officer
Lance V. Berberian	Executive Vice President and Chief Information Officer
Megan D. Bailey	Executive Vice President and Chief Strategy and Transformation Officer
Brian J. Caveney	Executive Vice President and President of Early Development Research Laboratories and Chief Medical and Scientific Officer
Jonathan P. DiVincenzo	Executive Vice President and President of Central Laboratories and International
Glenn A. Eisenberg	Executive Vice President and Chief Financial Officer
Anita L. Graham	Executive Vice President and Chief Human Resources Officer
Mark S. Schroeder	Executive Vice President and President of Diagnostics Laboratories and Chief Operations Officer
Amy B. Summy	Executive Vice President and Chief Marketing Officer
Peter J. Wilkinson	Senior Vice President and Chief Accounting Officer
Sandra D. van der Vaart	Executive Vice President, Chief Legal Officer, Chief Compliance Officer, and Secretary

Additional Officers:

Anil B. Asnani	Senior Vice President	James P. Maruca	Senior Vice President
Patricia A. Birbiglia	Senior Vice President	Rajat Mehta	Senior Vice President
Christopher M. Bosler	Senior Vice President	Jonathan C. Meltzer	Senior Vice President
Traci L. Butler	Senior Vice President	Michael F. Minahan	Senior Vice President
Chas B. Cook	Senior Vice President	Glenn H. Mogolowitz	Senior Vice President
Kevin J. DeAngelo	Senior Vice President	Lenny R. Monsour	Senior Vice President
Marcia T. Eisenberg	Senior Vice President	Michael P. Morgan	Senior Vice President
Patrick T. Ford	Senior Vice President	Robert L. Nelson, Jr.	Senior Vice President
Scott Frommer	Senior Vice President	Dale S. Phipps	Senior Vice President
Archie Glaspy	Senior Vice President	Francis W. Price	Senior Vice President
Serena Guzman Friedman	Senior Vice President	Amy Rhine-Pallas	Senior Vice President
William B. Haas	Senior Vice President	Michael R. Roberts	Senior Vice President
William Hanlon	Senior Vice President	Deborah A. Sesok-Pizzini	Senior Vice President
Donald E. Horton, Jr.	Senior Vice President	Tracy M. Strong	Senior Vice President
Yvette D. Jenkins	Senior Vice President	Jennifer Sutton	Senior Vice President
Miranda Johnson	Assistant Secretary	John L. Treadwell	Assistant Secretary
Richard G. Konzelman	Senior Vice President	Bryan T. Vaughn, Jr.	Senior Vice President
Thomas J. Kremer	Senior Vice President and Treasurer	Brenda Wagner	Senior Vice President
		Carl A. Warner	Senior Vice President
Kathryn W. Kyle	Senior Vice President and Assistant Secretary	Clarissa A. Willet	Senior Vice President
		Robert M. Wright	Senior Vice President
Shamyia Lando	Senior Vice President		
Devin M. Lorsson	Senior Vice President		

Additional Authorized Contract Signers: The following persons are authorized and empowered to execute as an Authorized Signer in connection with the responsibilities listed opposite their names:

Deborah J. Boles	Consumer Genetics	Brian G. Grajzar	Identity
Linda Bornholdt	DNA Paternity and HLA agreements	Sharon Griffin	Dianon and Integrated Oncology documents
Joshua Branch	Regional Controller (Atlantic Division)		
James A. Bucher	Divisional-Finance (Central North)	Kevin Gunter	Corporate and Executive Security
Michael W. Cervenak	Regional Controller (Northeast Division)	Erin Hall	Cell Line Authentication agreements
Andrew A. Chakeres	Employment Settlement agreements	Kevin Kennedy	Divisional-Operations (Northeast)
Kimberly P. Coker	Atlantic Division contracts	Ramesh Krish	Sourcing and Procurement
Diane Corbett	Covance Drug Development Quality agreements and Companion Diagnostics Quality agreements	Frances Martin	HR – Talent Acquisition matters
		Robert W. May	North Central Division lease documents, related client or landlord letters and contracts.
Jeffrey W. Craven	Corporate-DOD agreements	Angela R. Miller	Information Technology Letters of Authorization and H1B Client Letters for contractors in Corp IT
James Mike Creamer	Regional Controller (North Central)		
Pamela S. Edwards	Occupational Testing Services Contracts, Proposals and Letters	Melinda B. Nye	Center for Esoteric Testing agreements, SOW / Work Orders and related documents under LCAH services agreement for services performed by
John R. Funk	Banking matters		
Mark Garawitz	Real Estate and Construction documents		
Scott W. Gillum	Divisional-Finance (Mid-America)		

Akinbolade Oyegunwa	Monogram Biosciences	Paul Theobald	SOW / Work Orders and related documents under LCAH services
John E. Peterson	IT contracts and CEPs		agreement for services performed by Monogram Biosciences
	Patent/trademark prosecution documents (e.g., Powers of Attorney and application-related documents)	Sherry L. Thomas	Divisional-Contracting (Central North)
Lisa Pfefferle	Occupational Testing Services contracts, proposals and letters	Lyndon T. Tilson	Consumer Genetics contracts
Jeffrey Rowinski	OTS laboratory services and OTS wellness testing services	Ciara Trotter	Divisional-Contracting (Central North)
Michael J. Sapeta	LCAH agreements pertaining to the esoteric laboratory business, Facility agreements for CMBP, DNA Identification Division, Integrated Genetics, Integrated Oncology, and Consumer Genetics; and all Enterprise Specialty Services contracts	Gina Turner	DNA Paternity and HLA agreements
	Banking matters, Investment Committee matters, Unclaimed Property matters	Edward D. Van Nimwegen	Divisional-Finance (Mid-America)
Kimberly P. Shalewitz	Drug Development Testing referral business to Diagnostics; agreements related to Clinical Trials with academic institutions, Local Lab of Choice Clinical Trials; Phase 1 Clinic Trials; agreements related to After Market Testing; and all Enterprise Specialty Services contracts	Kurt W. Wanner	Divisional-Operations (Northeast)
Tyson Sullivan	DNA Paternity, HLA agreements, and System for Award (SAM) registration	Marc L. Warshawsky	Marketing and Communications (obligations less than or equal to \$1M in spend)
Antoinette Surgeon			Confidentiality Agreements
		Kellie Watson	Corporate -Confidentiality agreements and Venture Fund & Equity Investment documents
		Megann Vaughn Watters	Marketing and Communications (obligations less than or equal to \$250k in spend)
		Stephanie Wells	Travel (except for government contracts and bids)
		Debbie Burnett Williams	Payor Registration and Enrollments
		Kimberly T. Williams	Corporate IT agreements with approved CEP
		Scott Wingert	Divisional Controller (Southeast)
		Elvira Yankiv	Lab Administration
		Randolph M. Young	

Prepared 10/13/23