



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF LEGAL AND REGULATORY SERVICES
HEALTH FACILITIES ADMINISTRATION
129 PLEASANT STREET, CONCORD, NH 03301
ANNUAL LICENSE CERTIFICATE

Under provisions of New Hampshire Revised Statutes Annotated Chapter RSA 151, this annual license certificate is issued to:

Name: METABOLIC SOLUTIONS
Located at: 460 AMHERST STREET
NASHUA NH 03063

To Operate: Laboratory

This annual license certificate is effective under the conditions and for the period stated below:

License#: 02731

Effective Date: 03/01/2023

Expiration Date: 02/29/2024

Administrator: DAVID A. WAGNER

Lab Director: WILLIAM E OTTINGER

Total Number of Services: 1

LICENSED TO PERFORM CHEMISTRY

A handwritten signature in black ink, appearing to read "Michael S. Flynn", is located in the bottom right area of the certificate.

Chief Legal Officer