

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: 37608 AUTHORIZED CATEGORIES/TESTS: CLINICAL CHEMISTRY

Name and Director of Laboratory:

METABOLIC SOLUTIONS LLC ZAHIDUR ABEDIN, PH.D. 460 AMHERST STREET NASHUA, NH 03063

Owner:

MSI BUYER, LLC

**ISSUE DATE: August 15, 2025** 

**DATE EXPIRES: August 15, 2026** 

Debra L. Bogu MD

Debra L. Bogen, MD, FAAP 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.

