

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS
KMI DIAGNOSTICS, INC
8201 CENTRAL AVE NE SUITE P
MINNEAPOLIS, MN 55432

CLIA ID NUMBER
24D1030426

EFFECTIVE DATE

04/21/2015

EXPIRATION DATE

04/20/2017

LABORATORY DIRECTOR

THOMAS P UNCINI

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

201 Certs2_032415

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

| <u>LAB CERTIFICATION (CODE)</u> | <u>EFFECTIVE DATE</u> | <u>LAB CERTIFICATION (CODE)</u> | <u>EFFECTIVE DATE</u> |
|---------------------------------|-----------------------|---------------------------------|-----------------------|
| ROUTINE CHEMISTRY (310) | 10/24/2014 | | |
| ENDOCRINOLOGY (330) | 04/21/2005 | | |

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA
OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

State of California Department of Public Health
CLINICAL LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address or other site(s) on file with the department.

KMI DIAGNOSTICS, INC.
8201 CENTRAL AVENUE, NE, STE P
SPRING LAKE PARK MN 55432

OWNER(S):

MARK A KOWAL
ALMAZ KOWAL
MICHELLE SCOTT
MICHAEL FOLEY

DIRECTOR(S):

THOMAS P UNCINI MD

Lab ID Number: COS 00800179

Effective Date: October 30, 2014

Valid Until: October 29, 2015

CLIA Number: 24D1030426


Beatrice R. O'Keefe, Division Chief
Laboratory Field Services