

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

FLORIDA'S BLOOD CENTERS INC
CORPORATE HEADQUARTERS
8669 COMMODITY CIRCLE
ORLANDO, FL 32819

CLIA ID NUMBER

10D0293120

EFFECTIVE DATE

07/27/2011

LABORATORY DIRECTOR

RICHARD R GAMMON

EXPIRATION DATE

07/26/2013

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.



A handwritten signature in dark ink, appearing to read "Judith A. Yost". The signature is written in a cursive style.

Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations