

**State of California Department of Public Health**

**CLINICAL LABORATORY CERTIFICATE OF DEEMED STATUS**

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

**RHODE ISLAND BLOOD CENTER, A DIVISION OF NEW YORK BLOOD CENTER  
405 PROMENADE STREET  
PROVIDENCE RI 02908**

**OWNER(S):**

NEW YORK BLOOD CENTER, INC.

**DIRECTOR(S):**

ALEXANDRA JIMENEZ MD

**LAB ID Number:** CDS00800967  
**Effective Date:** July 16, 2019  
**Valid Until:** July 15, 2020  
**CLIA Number:** 41D0670559

*Robert J. Thomas*

Robert J. Thomas, Chief  
Laboratory Field Services