



GEORGIA DEPARTMENT OF  
COMMUNITY HEALTH

**STATE OF GEORGIA**  
**CLINICAL LABORATORY LICENSE**

This is to certify that a license is hereby granted to BAKOTIC PATHOLOGY ASSOCIATES  
(Name of Governing Body)  
to maintain and operate a Clinical Laboratory located at 6240 SHILOH ROAD; ALPHARETTA, GA 30005  
(Address)  
named as BAKO PATHOLOGY SERVICES  
(Name of Facility)

Pursuant to the terms of the Georgia Clinical Laboratory Licensure Law (Georgia Laws of 1970, p. 531 as amended), the above names facility is hereby licensed to function as a clinical laboratory, at address shown, for purposes of performing tests in the following categories or subcategories of procedures:

MICROBIOLOGY- BACTERIOLOGY I, BACTERIOLOGY II, MYCOLOGY I, MYCOLOGY II, VIROLOGY  
CLINICAL IMMUNOLOGY AND SEROLOGY- VIRAL SEROLOGY  
PATHOLOGY- EXFOLIATIVE CYTOLOGY, ANATOMIC PATHOLOGY

This license is effective October 31, 2019 and remains in effect unless revoked or suspended. This permit is granted pursuant to the authority vest in the Department of Community Health, official code of Georgia, Title 31, Chapter 5, and signifies that the provider complies with the Rules and Regulations of the Department of Community Health on the date this license was issued.

Laboratory Director: SCOTT ACKER License number: 060-339

GEORGIA DEPARTMENT OF COMMUNITY HEALTH  
This license is not transferable

HEALTHCARE FACILITY REGULATION DIVISION

Melanie Simon, Division Chief