DISTRIBUTOR OF LEGEND DRUGS OR LEGEND DEVICES

SUB-TYPE: Standard Distributor

PARAMETRICS MEDICAL, LLC

License No. 10289 effective 01/01/2022 (Original issue date: 06/28/2021), Expiring 12/31/2022
distributing from 1501 Leander Drive, Suite 140, Leander, TX, 78641
BUSINESS ADDRESS: 1501 LEANDER DRIVE, SUITE 140, LEANDER, TX, 78641
is duly licensed in the State of Louisiana with this Board under the provisions of Act 852 of 1988 (as amended).
This license is subject to regulation in the state of Louisiana

Additional Third-Party Logistics Providers:
NA

Board Secretary

ORIGINAL LICENSE — DISTRIBUTOR
This License is NOT TRANSFERABLE and must be Conspicuously Displayed. This license must be renewed annually.

SUB-TYPES:

Standard Distributor: Any entity that sales or facilitates the delivery of legend drugs or legend devices to persons other than the consumer or patient; including, but not limited to, manufacturers, repackagers, own-label distributors, jobbers, retail pharmacy warehouses, pharmacies, brokers, agents, freight forwarders, ship chandlers, reverse distributors, compounders/503b, and nuclear pharmacies.

Wholesale Distributor: Any entity that sales or facilitates the delivery of drug product (as defined by FDA) to persons other than the consumer or patient; not to include (not limited to) manufacturers, repackagers, third-party logistic providers, distributors of devices, medical gases, intravenous drugs for replenishment or irrigation, blood or blood components; radioactive drugs or biologicals, imaging drugs, homeopathic drugs, and compounded drugs.

Third-party Logistics Provider: Any entity that provides or coordinates warehousing, facilitates the delivery of, or other logistic services for a legend drug or legend device interstate and intrastate commerce on behalf of a manufacturer, distributor, or dispenser of a legend drug or legend device but does not take ownership of the legend drug or legend device nor have responsibility to direct the sale or disposition of the legend drug or legend device.