FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20540
wasiiiigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
h	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Black Jeffrey G.								ker or Tradin			(Ch	eck all applic	able)	ng Person(s) to Iss 10% O		wner			
(Last)	,	irst)	(Middle)				of Earliest 2023	Tran	saction (Mon	th/Da	ay/Year)		below)		Other (s below) Financial Office		·		
2 TOWER PLACE, STE 2000						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SOUTH FRANCE	- C	A	94080										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		_ Ru 	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											to		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)					Executio		Date	Transaction Dispose Code (Instr. 5)		rities Acqui ed Of (D) (In	red (A) or istr. 3, 4 and	5. Amour Securitie Beneficia Owned F Reported	es F ally (following (6. Owner Form: Di D) or Ind I) (Instr.	irect o direct E 4) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or Price	Transact (Instr. 3 a	action(s)			iiisu. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year)				ransaction Derivative ode (Instr. Securities			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	Ov Fo Dii or (I)	vnership orm: rect (D) Indirect (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Expira Exercisable Date		piration te	Title	Amount or Number of Shares		(Instr. 4)	1(3)			
Restricted Stock Units	(1)	05/15/2023			A		210,526		(2)		(2)	Common Stock	210,526	\$0	210,526		D		
Stock Option (Right to Buy)	\$1.9	05/15/2023			A		400,000		(3)	05/	15/2033	Common Stock	400,000	\$0	400,000		D		

Explanation of Responses:

- 1. Each Restricted Stock Unit represents the contingent right to receive one share of LAB common stock.
- 2. Restricted Stock Units vest as to 1/4 of the underlying shares on May 15, 2024, and as to an additional 1/16th of the total number of shares every three months thereafter, subject to Mr. Black's continued service through the applicable vesting date.
- 3. The Option becomes exercisable as to 1/4th of the underlying shares on May 15, 2024, and as to an additional 1/48th of the total number of shares each month thereafter, subject to Mr. Black's continued service through the applicable vesting date.

Remarks:

/s/Jeffrey G Black by Agnieszka Gallagher, Attorney- 05/17/2023 in-Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.