

DEPARTMENT OF PUBLIC HEALTH850 Marina Bay Parkway, Bldg P, 1st Floor
Richmond, CA 94804-6403
(510) 620-3800

Dear Tissue Bank:

Attached below is your tissue bank license.
Your license is void after the expiration date.NOTE: Application for renewal of license must be filed
with the department not less than 30 days prior to its
expiration date and shall be accompanied by the annual
renewal fee. (CA H&S Code §1639.2)**GENETICS & IVF INSTITUTE:
CRYOGENIC LABORATORIES INC
3015 WILLIAMS DRIVE SUITE 110
FAIRFAX, VA 22031**

ATTN: STEPHEN H. POOL, PhD

FORFEITURE OF LICENSEA Tissue Bank license shall be forfeited by operation of law
prior to its expiration date when one of the following occurs:

- (1) The tissue bank is sold or otherwise transferred.
- (2) The license is surrendered to the state department.

QUESTIONS AND INFORMATION:

If you have any questions, please write to:

STATE OF CALIFORNIA
DEPT. OF PUBLIC HEALTH
Laboratory Field Services
850 Marina Bay Parkway, Bldg P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Tear Here

Tear Here

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH**TISSUE BANK LICENSE**In accordance with Division 2, Chapter 4.1 of the Health and Safety Code, the entity named below is hereby licensed
to engage in the operation of a tissue bank at the indicated address**CRYOGENIC LABORATORIES INC
1944 LEXINGTON AVENUE NORTH
ROSEVILLE MN 55113**Owner(s) Name: GENETICS & IVF INSTITUTE
Address: 3015 WILLIAMS DRIVE SUITE 110
City, State, Zip: FAIRFAX VA 22031

TISSUE BANK ID NUMBER: CNC 80395

Issuance Date: MAY 03, 2011

Expiration Date: MAY 02, 2012

Tissue Bank Director:
STEPHEN H. POOL, PHD
Ronald Harkey, Chief, Tissue Bank Licensing Section
Laboratory Field Services