

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:
FAIRFAX CRYOBANK - AUSTIN
3015 WILLIAMS DRIVE, SUITE 110
FAIRFAX VA 22031****ATTN: STEPHEN H. POOL, PhD****FORFEITURE OF LICENSE**A 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.

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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**FAIRFAX CRYOBANK - AUSTIN
4201 MARATHON BLVD, SUITE 303A
AUSTIN, TX 78756**

Owner(s) Name: GENETICS & IVF INSTITUTE

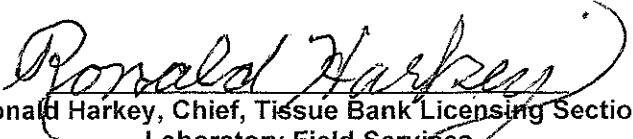
Address: 3015 WILLIAMS DRIVE

City, State, Zip: FAIRFAX, VA 22031

TISSUE BANK ID NUMBER: CNC 80681

Issuance Date: MAY 07, 2011

Expiration Date: MAY 06, 2012

Tissue Bank Director:
STEPHEN H POOL, PhD

 Ronald Harkey, Chief, Tissue Bank Licensing Section
 Laboratory Field Services