

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 listed tissue bank operation(s) at the indicated facility address.

CALIFORNIA CRYOBANK STEMCELL SERVICES DBA FAMILY CORD

**11915 LA GRANGE AVENUE
LOS ANGELES CA 90025**

OWNER(S):

CALIFORNIA CRYOBANK STEMCELL SERVICES, LLC
CALIFORNIA CRYOBANK LLC
CRYOBANK HOLDINGS LLC

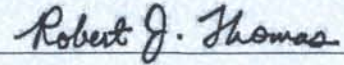
DIRECTOR(S):

JAIME SHAMONKI MD

TISSUE BANK ID Number: CTB 00080941

Issuance Date: August 19, 2017

Expiration Date: August 18, 2018



Robert J. Thomas, Acting Branch Chief
Laboratory Field Services