

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

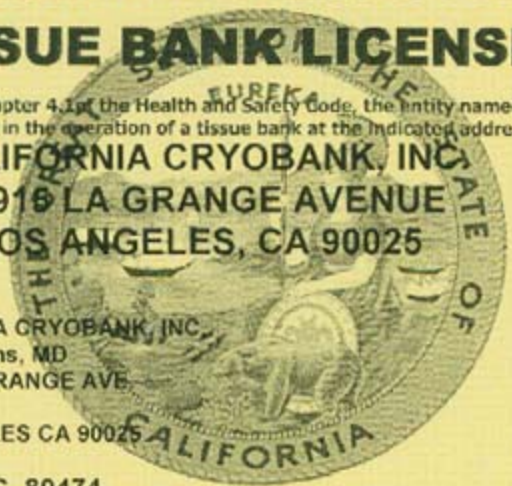
TISSUE BANK LICENSE

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

CALIFORNIA CRYOBANK, INC
11915 LA GRANGE AVENUE
LOS ANGELES, CA 90025

Owner(s) Name: CALIFORNIA CRYOBANK, INC
Charles Sims, MD
Address: 11915 LA GRANGE AVE
City, State, Zip: LOS ANGELES CA 90025

TISSUE BANK ID NUMBER: CNC 80474
Issuance Date: DECEMBER 31, 2008
Expiration Date: DECEMBER 30, 2009



A handwritten signature in black ink, reading "Karen L Nickel".

Karen L Nickel, Ph.D, Chief
Laboratory Field Services