

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

**DCI DONOR SERVICES, INC**  
**1714 HAYES STREET**  
**NASHVILLE, TN 37203**

Owner(s) Name: DCI DONOR SERVICES, INC

Tissue Bank Director:

Address: 1714 HAYES STREET

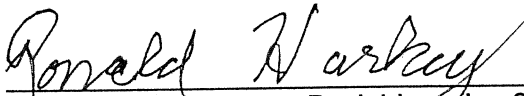
**CARRIE CROCKER**

City, State, Zip: NASHVILLE, TN 37203

TISSUE BANK ID NUMBER: **CNC 80538**

Issuance Date: **SEPTEMBER 05, 2016**

Expiration Date: **SEPTEMBER 04, 2017**

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