



Dear Tissue Bank Director:

Attached below is your tissue bank license.  
Your license is void after the expiration date.

NOTE: applications 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)

FAIRFAX CRYOBANK, INC - AUSTIN  
ATTN: SARA KRANER  
3015 WILLIAMS DR. STE 110  
FAIRFAX, VA 22031

**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: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
Laboratory Field Services, Tissue Bank Section  
850 Marina Bay Parkway, Building P, 1st Floor  
Richmond, CA 94808-6403

Internet Address: [www.cdph.ca.gov/LFS](http://www.cdph.ca.gov/LFS)  
Thank you for your cooperation

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

**FAIRFAX CRYOBANK, INC - AUSTIN**  
**1305 WEST 34TH ST. STE210**  
**AUSTIN, TX 78705**

**OWNER(S):**

GENETICS & IVF INSTITUTE, INC  
GIVF ULTIMATE INTERMEDIATE, INC.  
USF ULTIMATE HOLDINGS, LP

**DIRECTOR:**

JOEY MANHEIN

**TISSUE BANK ID Number: CTB 00080681**

Issuance Date: December 30, 2025

Expiration Date: December 29, 2026

Charlet Archuleta, Acting Branch Chief  
Laboratory Field Services