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)

Lion's Eye Bank of Lexington
3290 Blazer Parkway, Suite 201
Lexington, KY 40509
Att: Robert A. Gayheart

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.

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
TISSUE BANK LICENSE

In accordance with Division 2, Chapter 4, 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

LION'S EYE BANK OF LEXINGTON
3290 BLAZER PARKWAY, SUITE 201
LEXINGTON, KY 40509

Owner(s) Name: LION'S EYE BANK OF LEXINGTON
Address: 3290 BLAZER PKWY, STE 201
City, State, Zip: LEXINGTON, KY 40509
TISSUE BANK ID NUMBER: CNC 80488
Issuance Date: MAY 31, 2008
Expiration Date: MAY 30, 2009

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