

**NEW YORK STATE DEPARTMENT OF HEALTH**

**PROVISIONAL LICENSE FOR TISSUE BANK OPERATION**

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

*Tissue Bank ID No.: CP141TP097*

**Tissue Bank Director:**

**Holly Patel**

**Sr. Manager, QA**

**Medical Director:**

**Michael J. Bauer, M.D., FACP, CTBS**

**MiMedx Tissue Services, LLC  
1775 West Oak Commons Ct., N.E.  
Marietta, GA 30062**

**is hereby APPROVED as a Tissue Bank for the following categories of service:**

**Comprehensive Tissue Procurement Service**

**Tissue Processing Facility**

**Musculoskeletal tissue**

**Skin tissue**

**Amniotic membrane**

**Amniotic membrane**

**Issued: April 27, 2018**

**Expires: May 1, 2020**

**Owner: MiMedx Group, Inc.**

**Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.**

DOH-3908 (04/2001)