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)

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.

BIOHORIZONS IMPLANT SYSTEMS, INC
ATTN: BILL HORNBUCKLE
2300 RIVERSCHASE CENTER
BIRMINGHAM, AL 35244

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
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.

BIOHORIZONS IMPLANT SYSTEMS, INC
2300 RIVERSCHASE CENTER
BIRMINGHAM, AL 35244

OWNER(S):
BHCL US HOLDINGS INC
BIOHORIZONS HOLDINGS, INC
HENRY SCHEIN, INC

DIRECTOR:
JARED COOPER PHD

TISSUE BANK ID Number: CTB 00080263
Issuance Date: December 6, 2025
Expiration Date: December 5, 2026

Charlet Archuleta, Acting Branch Chief
Laboratory Field Services