



New Jersey Department of Health and Senior Services
 Division of Public Health and Environmental Laboratories
BLOOD BANK LICENSE

License No: 5461
 Blood Bank Code: 1112
 Effective: 01/01/2009
 To: 12/31/2009

CRYO-CELL INTERNATIONAL, INCORPORATED
700 BROOKER CREEK BOULEVARD, SUITE 1800
OLDSMAR FL 34677

The above, pursuant to Chapter 33, P.L. of 1963, is hereby authorized to perform the below indicated services:
 Authorized Services

<p><input type="checkbox"/> Transfusion Services</p> <p><input type="checkbox"/> On-Site</p> <p><input type="checkbox"/> Home</p> <p><input type="checkbox"/> Transfusion Only</p> <p><input type="checkbox"/> On-Site</p> <p><input type="checkbox"/> Home</p> <p><input type="checkbox"/> Emergency</p>	<p><input checked="" type="checkbox"/> Collection Services</p> <p><input type="checkbox"/> On Site</p> <p><input type="checkbox"/> Mobile Site</p> <p><input type="checkbox"/> Allogeneic</p> <p><input type="checkbox"/> Autologous</p> <p><input type="checkbox"/> Directed</p> <p><input type="checkbox"/> Therapeutic Phlebotomy</p> <p><input checked="" type="checkbox"/> Cord Blood</p> <p><input type="checkbox"/> Hematopoietic Progenitor Cells (HPC)</p> <p><input type="checkbox"/> Double Red Cell</p> <p><input type="checkbox"/> Perioperative Autologous Collection/Administration</p> <p><input type="checkbox"/> Hemapheresis</p> <p><input type="checkbox"/> Plasmapheresis</p> <p><input type="checkbox"/> Leukapheresis</p> <p><input type="checkbox"/> Plateletpheresis</p> <p><input type="checkbox"/> Cytapheresis</p> <p><input type="checkbox"/> Therapeutic</p>	<p><input type="checkbox"/> Processing (Routine)</p> <p><input type="checkbox"/> Processing (Special)</p> <p><input checked="" type="checkbox"/> Processing (HPC)</p> <p><input checked="" type="checkbox"/> Storage (HPC)</p> <p><input type="checkbox"/> Component Preparation</p> <p><input type="checkbox"/> Manufacturer</p> <p><input type="checkbox"/> Broker</p>
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Commissioner of Health and Senior Services