

**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

*Facility ID: 28*

**Tissue Bank Director:**  
**William C. Baird, III, PhD, HCLD**  
**Lab Director**

**Medical Director:**  
**Christopher Szlag, D.O.**

**Cryobiology, Inc.**  
**4845 Knightsbridge Blvd., Suite 200**  
**Columbus, OH 43214**

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

**Comprehensive Tissue Procurement Service**  
**Tissue Processing Facility**

**Male reproductive tissue**  
**Male reproductive tissue**

**Issued: February 27, 2026**

**Owner: Cryobiology, Inc.**

**Expires: March 1, 2028**

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

DOH-3908 (04/2001)