STATE OF LOUISIANA

LHS-16B (R 9/22)

ANNUAL

Louisiana Department of Health / Office of Jublic Health
628 N. 4TH STREET • 3RD FLOOR • BATON ROUGE, LOUISIANA 70802

Print Date 07/02/2024 Expires on 06/30/2025

PERMIT TO OPERATE

PERMIT NUMBER:

08-0000395

Type of Operation: Drug Manufactubescription:

Human Blood Products, Human Blood / ANNUAL

This is to certify that the below named owner and establishment name and location has duly registered with the Louisiana Department of Health in accordance with the Sanitary Code of Louisiana, and is hereby given permission to operate.

Permit to Operate is not transferable: New Owner and/or New Location requires a new permit.

Permit to Operate remains the property of the Louisiana Department of Health, Office of Public Health, and may be revoked or suspended for failure to comply with provisions of the State Sanitary Code or other applicable laws and/or regulations.

LIFESHARE BLOOD CENTERS PO BOX 65270 SHREVEPORT LA 71136

ISSUED TO/NOT TRANSFERABLE

LIFESHARE BLOOD CENTER CORPORATION (BOSSIER)

1523 Doctors DR **BOSSIER CITY LA 71111**

JOSEPH KANTER, M.D.

STATE OF LOUISIANA

Louisiana Department of Health / Office of Jublic Health
628 N. 4TH STREET • 3RD FLOOR • BATON ROUGE, LOUISIANA 70802

STATE HEALTH OFFICER LHS-16B (R 9/22)

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LIFESHARE BLOOD CENTERS

PO BOX 65270 SHREVEPORT LA 71136 LIFESHARE BLOOD CENTER CORPORATION (BOSSIER)

1523 Doctors DR **BOSSIER CITY LA 71111**

DUPLICATE

JOSEPH KANTER, M.D.

FOR YOUR INFORMATION Please post in a conspicuous place.

It is the responsibility of the permit holder to notify the appropriate Parish/Parish Manager of any changes regarding the above permitted establishment.

Please include the permit number of the establishment with any and all correspondence.

STATE HEALTH OFFICER