Innovations in Regenerative Biomaterials

www.mimedx.com

March 2013

Forward Looking Statement

This document contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. These statements include, but are not limited to, the market opportunity for the Company's products, the expected growth in revenue and customer base, the availability of third-party reimbursement for the Company's products (whether by Regional Macs or private health insurers), projected placental donation rates and projected new hospital procurement contracts, projected clinical study activity, journal submissions and publications, anticipated catalysts for growth (including additional publications, expansion of the sales force and new patent issuances), projected revenues, gross margins and adjusted EBITDA and the expansion of the Company's products for additional surgical applications. These statements are based on current information and belief, and are not guarantees of future performance. Our ability to predict results, financial or otherwise, or the actual effect of future plans or strategies is inherently uncertain and actual results may differ from those predicted depending on a variety of factors. Among the risks and uncertainties that could cause actual results to differ materially from those indicated by such forward-looking statements include that the Company's products may not gain the anticipated acceptance in the marketplace or that acceptance may be delayed; the effects of competition; changes in reimbursement for the Company's products, lower than anticipated placental donations, delays in entering into or inability to enter into anticipated hospital procurement agreements, delays in the issuance of new patents or disallowance of significant claims, the inability to expand the Company's sales force, higher than anticipated costs, delays in clinical trials or unexpected results, delays in or failure of new product development, and the risk factors detailed from time to time in the Company's periodic Securities and Exchange Commission filings, including, without limitation, its 10-K filing for the fiscal year ended December 31, 2011. By making these forward-looking statements, MiMedx Group, Inc. does not undertake to update those in any manner except as may be required by the Company's disclosure obligations in filings it makes with the Securities and Exchange Commission under the federal securities laws.

Company Summary

- Publicly traded OTC:BB MDXG; Market Cap ≈ $300M
- Over 75 issued and pending patents
- Multi-billion dollar market opportunity
- Experienced management team to manage rapid growth (www.thepetitgroup.com)
- Revenue growing at a rapid rate quarter over quarter in wound, spine and other markets, driven by amniotic membrane tissue allografts
- Rapid growth in customer base, quarter over quarter, indicating market acceptance
- Strongest cash position in company's history
- Three successive quarters of positive adjusted EBITDA

Experienced Management Team

Parker H. "Pete" Petit
Chairman & CEO

William C. Taylor
President & COO

Michael J. Senken
Chief Financial Officer

Brent D. Miller
Executive Vice President

Donald E. Fetterolf, MD
Chief Medical Officer

Deborah L. Dean
Executive Vice President

Roberta L. McCaw
General Counsel

Thornton A. Kuntz
Vice President, HR & Administration

Michael W. Carlton
Vice President, Global Sales

H. Frank Burrows
Vice President, Corporate Strategy

Technology

- Transplanted amniotic membrane tissue allografts
- Placentas donated from Caesarean section deliveries
- Proprietary PURION® process
  - 25 applications filed; 1 issued 12/12, 4 others expected in near term
  - Trade secrets related to process
- Logistically superior; 5-year shelf life at room temperature storage
- Clinically effective and cost effective
  - Enhances healing
  - Reduces scar tissue
  - Reduces inflammation
  - Reduces time and cost to heal
- Broad patient and procedure usage to date
  - Over 120,000 grafts distributed
  - Zero tissue-related adverse events

Regulatory

- Regulated under Section 361 of the Public Health Service Act
- Passed March 2011 FDA audit and July 2012 audit with clean inspection reports and no findings
- No 510(k) or PMA required for allograft tissue if:
  - Minimally manipulated
  - Homologous use
- Human tissue already proven safe and effective
- MiMedx processing Certified by the American Association of Tissue Banks (“AATB”)
- This regulatory path is a distinct advantage for speed to market

Reimbursement

- Completed first Random Controlled Trial (RCTs)
- Conducting numerous additional RCTs
- Studies currently being conducted on:
  - Diabetes foot ulcers and venous leg ulcers
  - Spine scar tissue and cranial surgeries
  - Epicondylitis (tennis & golfer's elbow) and plantar fasciitis
- Multiple health plans currently reimbursing
- Medicare Q4131 effective Jan 1, 2013 for EpiFix, chronic wound care
  - As of March 2013, five Regional MAC groups have committed to paying using this code: Palmetto, Cahaba, NGS, Novitas and NHIC

Large Market Opportunity

EpiFix®

- Chronic wounds
  - Diabetic foot ulcers
  - Venous stasis ulcers
  - Arterial ulcers
  - Pressure ulcers
- Acute/Surgical wounds
  - Burns
  - Plastic surgery
  - Scar revision
- Near term, accelerated ramp
- $5.5B market

AmnioFix®

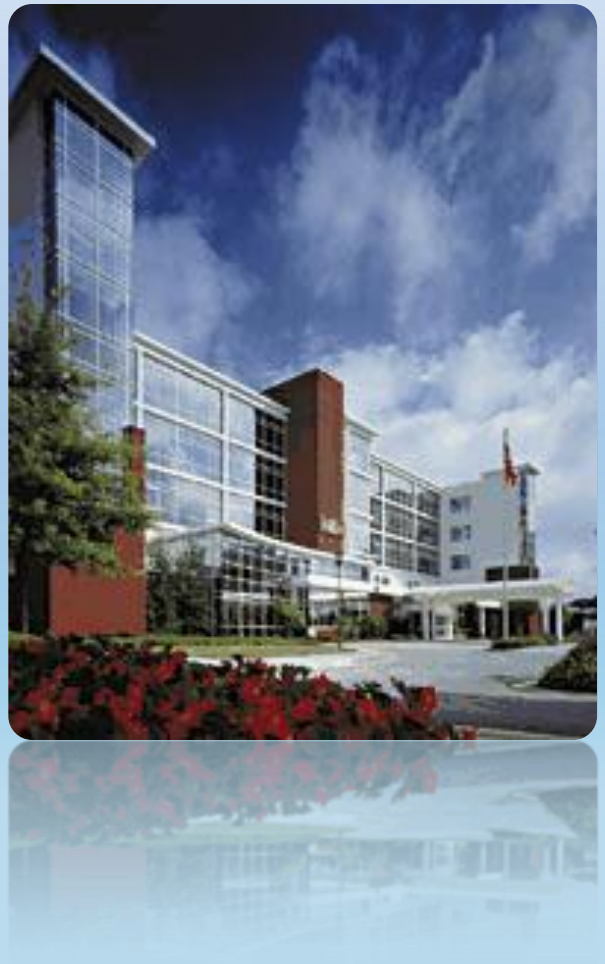
- Tendon / Ligament wrap
- Peripheral nerve wrap
- Spinal surgery
  - Fusions
  - Laminectomies
  - Disk replacements
  - Dural repair
- General surgery, gynecology, etc.
- Near to long-term, moderate ramp
- $4.8B market

Soft Tissue Repair

Not simply dermis or epidermis repair

Placenta Donation

- Cesarean sections
  - Placenta donor history
  - Serologic tests
- 2011 Placenta procurement
  - 3 Hospitals
  - Physician contracts
- 2012 Placenta procurement
  - 18 hospitals
  - Expected to fulfill full-year donor needs
- 2013 and beyond
  - Contracted with national organizations for accelerated nationwide placenta donations
- Goal
  - Projected 30 contracted hospitals by early 2013



PURION® Process

- Gentle
- Dehydrated
- Effective bio-burden reduction
- 5 year shelf life
- Specifically developed for the unique characteristics of amniotic membrane
- Minimal graft manipulation maintains structural and biological integrity

Over 120,000 Amniotic Tissue Grafts Distributed

EpiFix® Attribute Matrix

Product Uses	EpiFix®	Apligraf®	Dermagraft®
Chronic Wound: Diabetic Foot Ulcer	✓	✓	✓
Chronic Wound: Venous Leg Ulcer	✓	✓	FAILED TRIAL
Chronic Wound: Pressure Ulcer (bed sore)	✓		
Chronic Wound: Arterial Ulcers	✓		
Acute Wounds: Burns	✓		
Acute Wounds: Trauma	✓		
Acute Wounds: Surgical	✓		

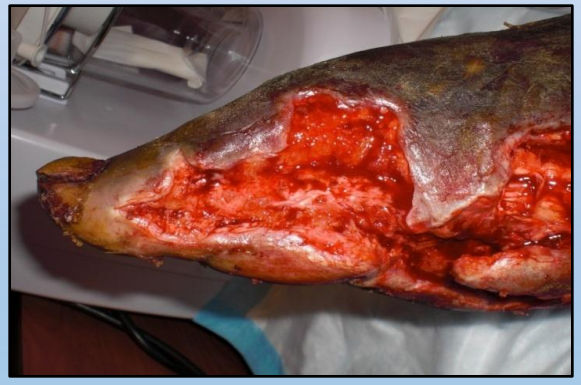
EpiFix® Attribute Matrix

TREATMENT COST*	EpiFix®	Apligraf®	Dermagraft®
Average Applications per Patient	**1-2**	3-5	4-8
Average Cost to Closure	**$3,410**	$8,000	$12,800
EASE OF USE	**EpiFix®**	**Apligraf®**	**Dermagraft®**
Vulnerable Viable Cells	**NO**	Yes	Yes
Wide Temperature Range	**0-38˚ C**	NO	NO
Frozen	**NO**	NO	Yes
Limited Temperature Range	**NO**	YES 20-23˚ C	YES (-80˚C) ±10%
Shelf Life	**5 Years**	10 days	6 months
Shipping	**Easy**	Special (CO_2)	Dry Ice
Multiple Sizes	**YES**	NO	NO

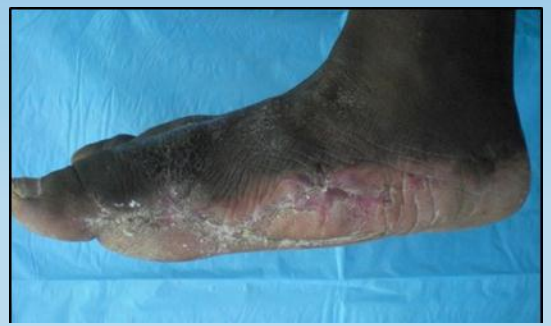
*[1] EpiFix: Value Based Purchasing for Wound Care White Paper; Donald Fetterolf, MD, MBA; [2] Falanga V; Margolis D; Alvarez O; Auletta M; Maggiacomo F; Altman M; Jensen J; Sabolinski M; Hardin-Young and the Human Skin Equivalent Investigators Group "Rapid healing of venous ulcers and lack of clinical rejection with an allogeneic cultured human skin equivalent." ArchDermatol. (134)3. 01-MAR-1998. pp 293-300. [3] Apligraf product promotional literature estimates of cost/reimbursements. 2010. [4] Apligraf product literature, "Rethink the Wound. Think Apligraf" 2010. John, T. "Human amniotic membrane transplantation: Past, present, and future." Ophthal Clin N Am. (16). 2003. pp 43-65. [5] Dermagraft product literature, describing treatments weekly for 8 applications.

Case Studies

Diabetic Foot Ulcer

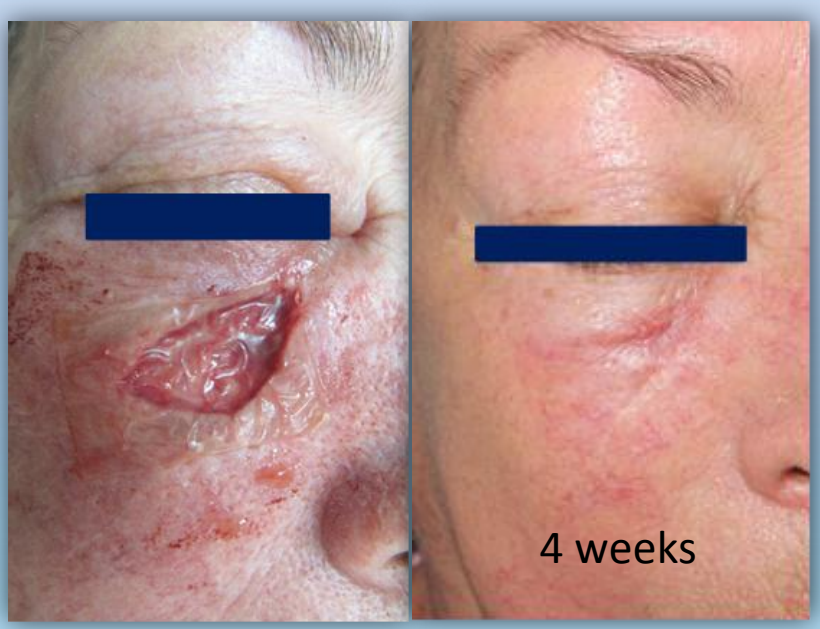


Day 0: After debridement & prior to application of EpiFix



Day 28: Healed

MOH's Surgery



Wound healed at 4 weeks
Face showed no scar at 10 months

VA EpiFix® Performance and Cost Effectiveness

All VA study patients received at least four weeks of standard of care treatments with no improvement before EpiFix® was applied.

- VA Study #1
  - Twenty patients treated with EpiFix®. Average number of applications = 2.4
  - Cost to use EpiFix® was 42% less expensive than previously utilized advanced therapies; healed patients by 50% faster rate
  - Overall savings to facility: $9 million over two years
- VA Study #2
  - EpiFix® used to close wounds in place of competitive products
  - Savings of over $25,000 using EpiFix® per five patients treated
  - No more than four applications needed
- 7 other VA studies presented at Desert Foot Conference 2012
  - 2 EpiFix® posters received awards

* Off-loading strategies with gauze and saline dressing changes

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Scientific & Clinical Studies

- **Scientific studies**
  - Several studies completed, both internal and external
- **Published Articles:**
  - Snyder, R and Fetterolf, D. The Scientific and Clinical Support for the Use of Dehydrated Amniotic Membrane in Wound Management. Wounds. 2012.
  - Forbes, J and Fetterolf, D. Dehydrated amniotic membrane allografts for the treatment of chronic wounds; a case series. Journal of Wound Care. June 2012; 21(6):290-296
  - Sheikh, E. and Fetterolf, D. -- Use of Dehydrated Human Amniotic Membrane (dHAM) Allografts to Promote Healing in Patients with Refractory Non-healing Wounds. International Wound Journal. (In Press.)
  - Shah, A. Clinical Report – The Application of EpiFix Amniotic Membrane Dressings to Lower Extremity Wounds. Submitted for publication.

Randomized Controlled Trials (RCTs)

- Prospective RCT1, Venous Ulcers - In process, Projected Q2 2013
- Prospective RCT2, Diabetic Foot Ulcers - Complete
- Prospective RCT3, Diabetic Foot Ulcers - In process, Projected Q1 2013
- Prospective RCT4, Diabetic Foot Ulcers - In process, Projected Q2 2013
- Prospective RCT5, AmnioFix® Posterior Spine Scar Tissue - In process, Projected Q4 2013
- Prospective RCT6, AmnioFix® Injectable Epicondylitis - Projected Q2 2013
- Prospective RCT7, AmnioFix® Injectable Plantar Fasciitis – In process, Projected Q1 2013
- Prospective RCT8, AmnioFix® Wrap - Projected Q3 2013
- Prospective RCT9, Craniotomy, Projected Q3 2013
- Prospective RCT10, Prostatectomy, Projected Q3 2013

EpiFix® Clinical Trial

- EpiFix® trial showed statistical significance with 92% of patients completely healed in six weeks
- Study terminated early; to be submitted for peer reviewed journal publication

EpiFix® vs. Dermagraft® Studies

EpiFix®	Dermagraft®
• Diabetic foot ulcers • Standard of Care for 4 weeks • Real life patient population	• Only plantar surface diabetic foot ulcers • Standard of Care for 6 weeks • Microcosm of true population

Disruptive Technologies

Past Disruptions

Mechanical
Multi Billion

1995
Vacuum Assist Closure

Growth Factor
$300 million +

1998
Regranex®

Tissue Engineered Skin
$600 Million +

1998
Apligraf®

2001
Dermagraft®

Dehydrated Amniotic Membrane & Powder Allograft is the most recent disruptive technology in wound healing

EpiFix®

AmnioFix®

VAC 1995 = http://www.worldwidewounds.com/2001/may/Thomas/Vacuum-Assisted-Closure.html , Apligraf 1998 = http://findarticles.com/p/articles/mi_m0EIN/is_1999_Nov_3/ai_57155480/, Regranex 1998 = http://www.regranex.com/REGRANEX%20Gel%20Fact%20Sheet.php, Dermagraft 2001 = http://global.smith-nephew.com/master/news_dermagraft_joint_ven_13349.htm

Distribution

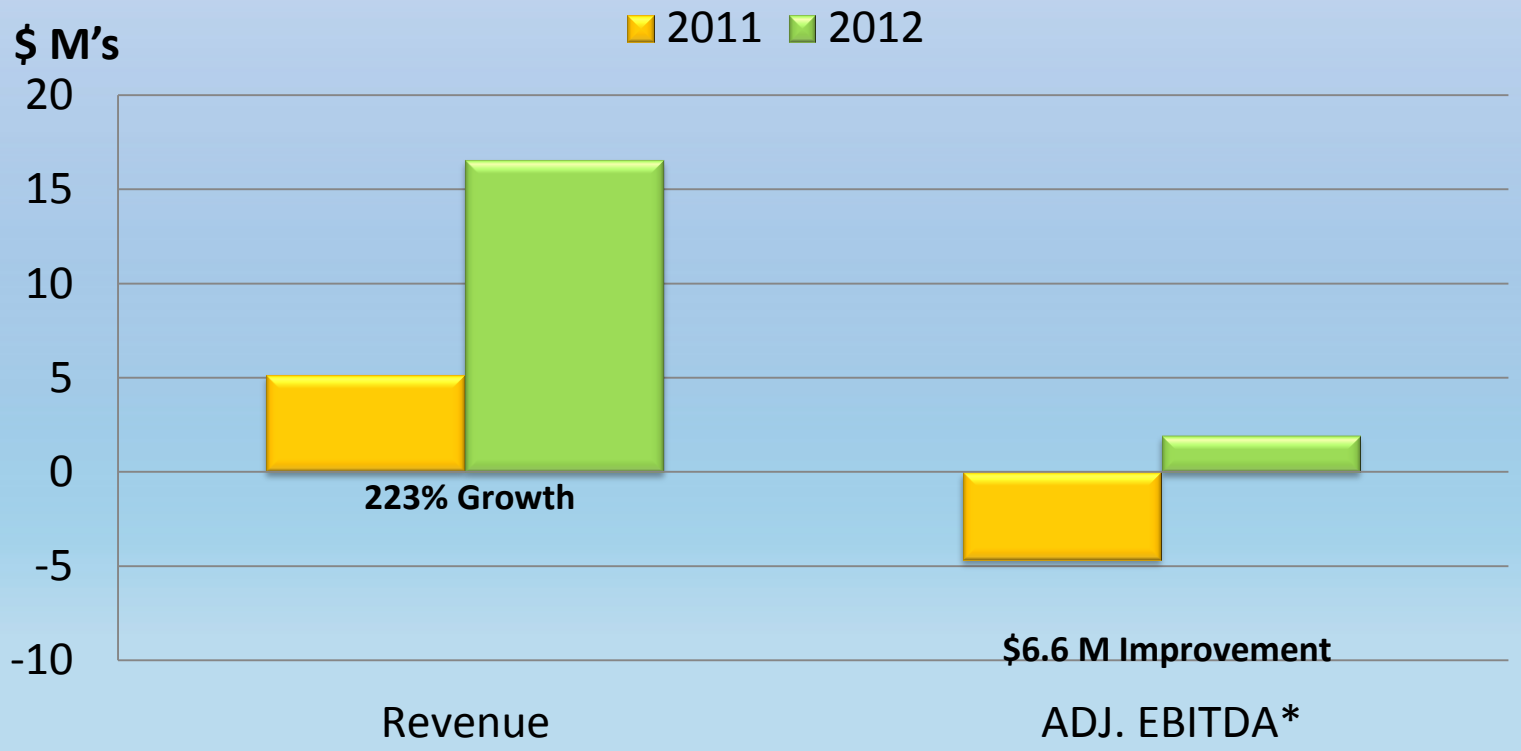
- Currently using 6 master distributors and 24 independent sales agent groups
- Managed by 7 national and regional managers
- Hybrid Sales Model
  - Direct sales model in government accounts, with over 20 sales employees
  - Combination of direct sales employees and sales agents in commercial wound care, moving towards a fully direct sales model
  - Sales agents and distributors in surgical and sports medicine
- Plan to develop distribution as a corporate asset

Catalysts for Growth

- January Q-code rollout
- Uptake in MAC's throughout the year
- Complete multiple RCT's
- Additional publications
- Expansion of direct sales force
- Issuance of additional patents

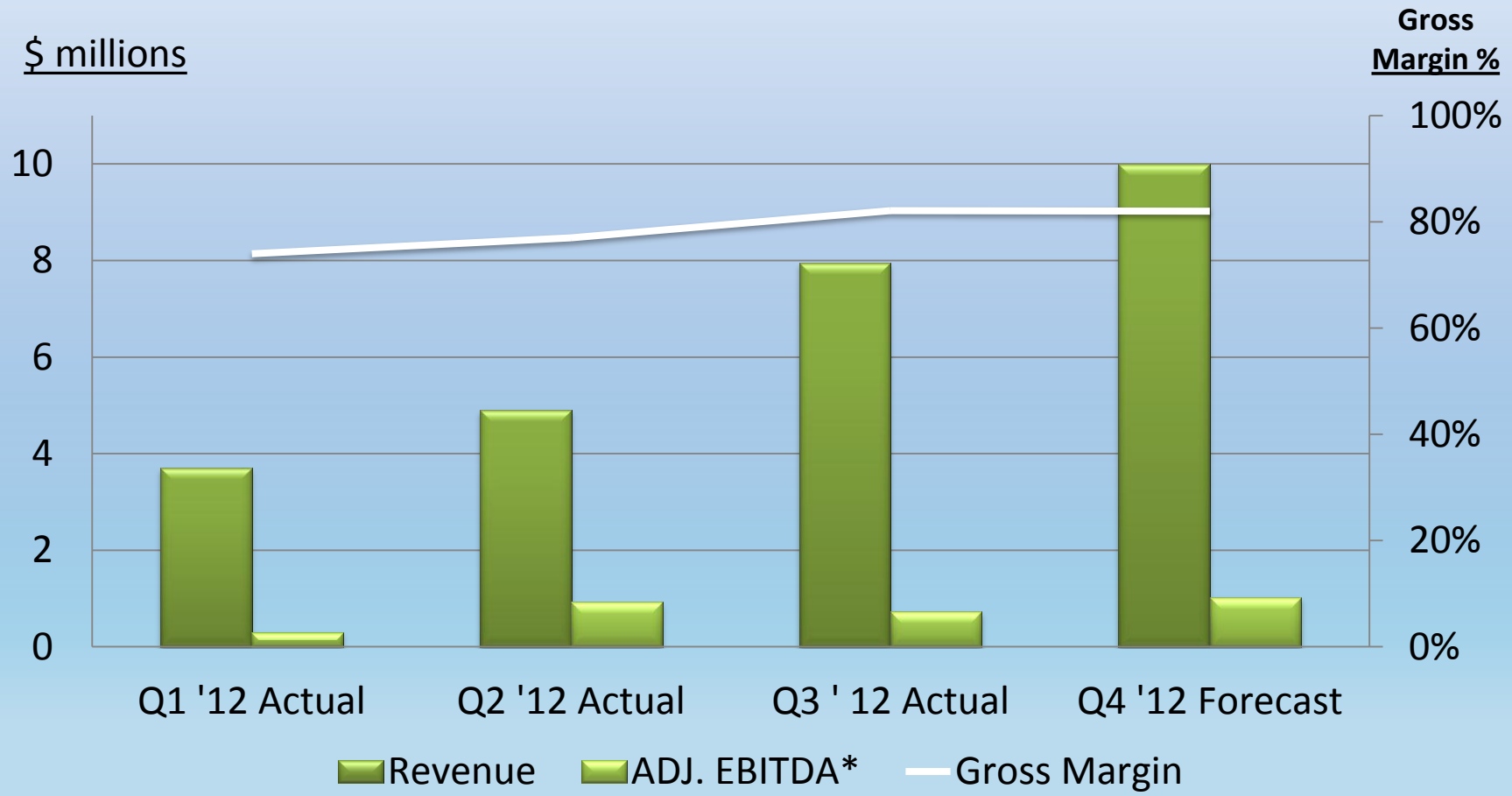
First Nine Months 2012

- Surgery/sports medicine 51%; Wound Care 38%; Other 11% of total revenue
- Gross margins: Q1 74%: Q2 77%; Q3 82%
- Added wound care direct sales force for government accounts in Q3



*Excludes share based compensation, earnout and impairment charges

2012 Actual/Forecast

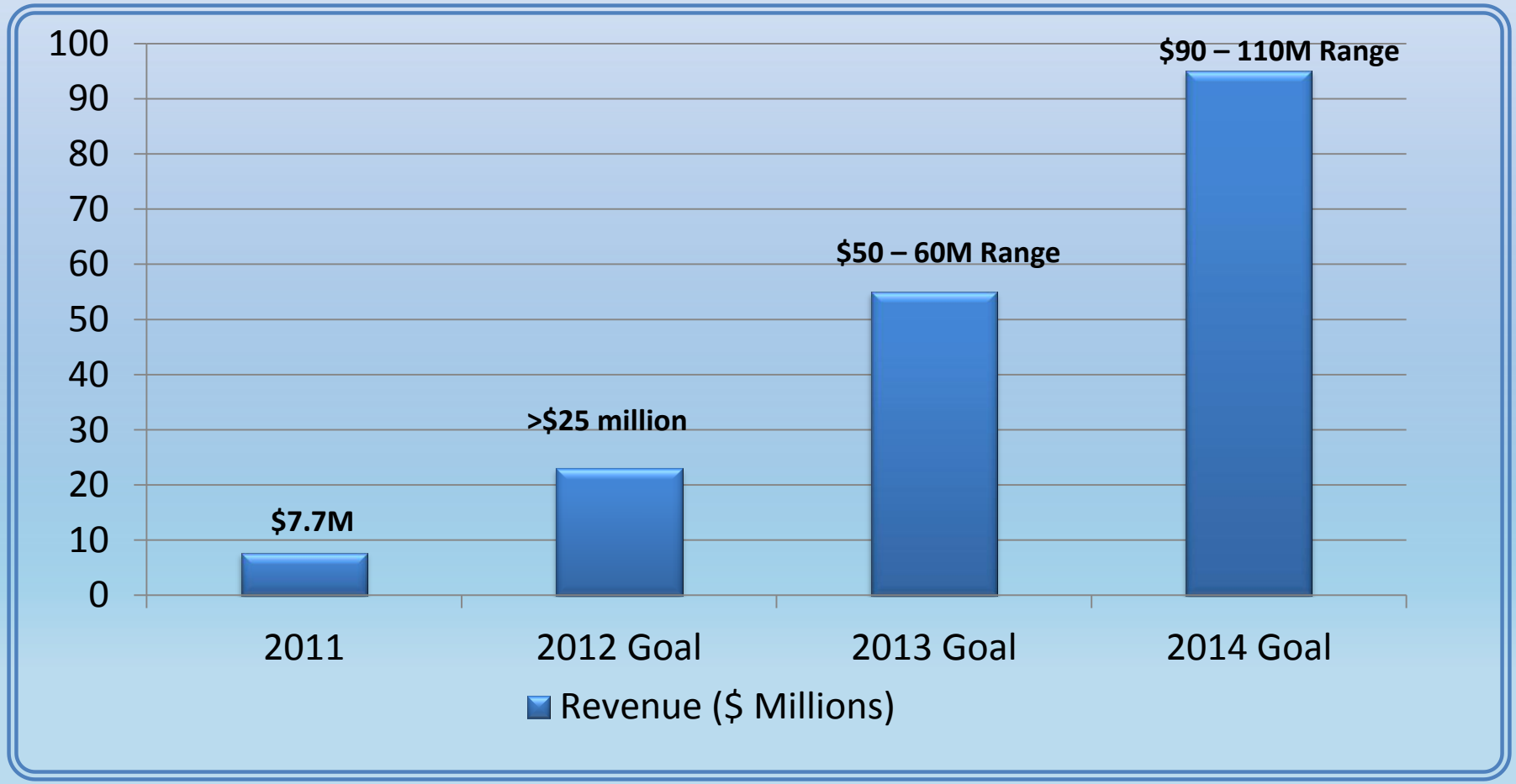


*Excludes share based compensation, earnout and impairment charges

Other Financial Highlights 2012

- Ended Q3:
  - $7.6M Cash
  - $16.2M Current Assets
  - $3.8M Current Liabilities (excluding convertible notes and non-cash earn out)
  - $19.2M Shareholders' Equity
- Capital structure simplified (contingent warrants voided)
- Minimal capital expenditures required for growth

Longer Term Financial Goals



Investment Highlights

- Technology platform well positioned to exploit large high growth markets, including wound care and soft tissue regeneration
- More predictable REGULATORY profile compared to traditional device companies due to allograft platform offerings
- EXPERIENCED management team with proven track record of success in high growth healthcare businesses
- Strong PATENT portfolio creates significant barriers to entry
- PURION® processed allografts demonstrate clinical and cost advantages over competitors
- Shire acquisition of ABH affirms revenue growth and value creation potential
- Near term milestones for value creation:
  - Completion of RCT's
  - National rollout of VA program with newly issued FSS code
  - Issuance of first tissue related Patents
  - Expansion into additional surgical procedures
  - CMS Q code in Q1 2013 expands wound market opportunity
  - First Peer Reviewed Articles Published in Nationally Recognized Medical Journals

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