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U.S. Department of Commerce  
Patent and Trademark Office  
TRADEMARK

FORM PTO-1618A  
Expires 06/30/99  
OMB 0651-0027

06-17-1999



101037621

RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

6-17-99

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

<b>Submission Type</b>		<b>Conveyance Type</b>	
<input checked="" type="checkbox"/> New	<input type="checkbox"/> Resubmission (Non-Recordation) Document ID # _____	<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Correction of PTO Error Reel # _____ Frame # _____	<input type="checkbox"/> Corrective Document Reel # _____ Frame # _____	<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Nunc Pro Tunc Assignment Effective Date Month Day Year _____
		<input type="checkbox"/> Merger	
		<input checked="" type="checkbox"/> Change of Name	
		<input type="checkbox"/> Other _____	

**Conveying Party**  Mark if additional names of conveying parties attached

Name J.E. Hanger, Inc., of Georgia Execution Date 11 26 1996  
Month Day Year

Formerly \_\_\_\_\_

Individual  General Partnership  Limited Partnership  Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Georgia

**Receiving Party**  Mark if additional names of receiving parties attached

Name Southern Prosthetics Supply

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 7700 Old Georgetown Road

Address (line 2) \_\_\_\_\_

Address (line 3) Bethesda Maryland 20814  
City State/Country Zip Code

Individual  General Partnership  Limited Partnership  If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Georgia

06/17/1999 DGM/LES  
01 FC:481 40.00 CH  
02 FC:484 120.00 CH  
03 FC:482 25.00 CH

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK  
REEL: 1881 FRAME: 0274

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Registration Number(s)**

<input type="text" value="1520220"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="1412186"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Laura E. Goldbard

6/16/99

Name of Person Signing

Signature

Date Signed

**Secretary of State  
Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530**

DOCKET NUMBER : K91060806  
CONTROL NUMBER : J316461  
DATE INC/AUTH/FILED: 09/19/1917  
JURISDICTION : GEORGIA  
PRINT DATE : 04/16/1999  
FORM NUMBER : 215

CT CORPORATION SYSTEM  
RUDENE REMBERT  
1201 PEACHTREE STREET, NE  
ATLANTA, GA 30361

**CERTIFIED COPY**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed under the name of

**SOUTHERN PROSTHETIC SUPPLY, INC.  
A DOMESTIC PROFIT CORPORATION**

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the date set forth above its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.



A handwritten signature in cursive script, appearing to read "Cathy Cox".

Cathy Cox  
Secretary of State

Secretary of State  
Business Information and Services  
Suite 315, West Tower  
2 Martin Luther King Jr. Dr.  
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 963370536  
CONTROL NUMBER: 8316461  
EFFECTIVE DATE: 11/27/1996  
REFERENCE : 0091  
PRINT DATE : 12/02/1996  
FORM NUMBER : 0611

CT CORPORATION SYSTEM  
PATTIE HARDY  
1201 PEACHTREE STREET, NE  
ATLANTA, GA 30361

CERTIFICATE OF NAME CHANGE AMENDMENT

I, the Secretary of State and the Corporation  
Commissioner of the State of Georgia, do hereby certify under the  
seal of my office that

J. E. HANGER, INC., OF GEORGIA  
A DOMESTIC PROFIT CORPORATION

has filed articles of amendment in the office of the Secretary of  
State changing its name to

SOUTHERN PROSTHETIC SUPPLY, INC.

and has paid the required fees as provided by Title 14 of the  
Official Code of Georgia Annotated. Attached hereto is a true and  
correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the  
State of Georgia on the date set forth above.



*Lewis A. Massey*

Lewis A. Massey  
Secretary of State

ARTICLES OF AMENDMENT

8316461  
9630536

To the Secretary of State:

Pursuant to the provisions of the Georgia Business Corporation Code, Section 14-2-1006, the undersigned corporation hereby amends its Articles of Incorporation, and for that purpose, submits the following statement:

- (1) The name of the corporation is J.E. Hanger, Inc. of Georgia.
- (2) The text of the amendment adopted is as follows:

ARTICLE ONE

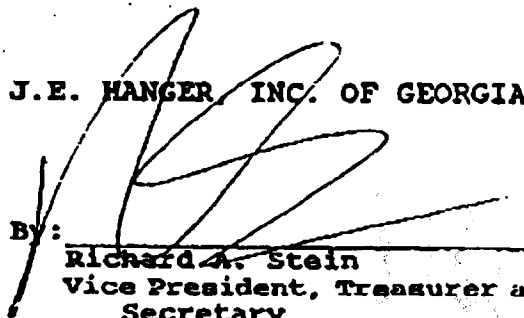
Name

The name of the corporation is Southern Prosthetic Supply, Inc.

- (3) There is no exchange, reclassification or cancellation of issued shares as a result of this amendment, which solely changes the name of the corporation.
- (4) The amendment was duly approved on November 25, 1996, by the Board of Directors of the corporation and duly ratified on the same date by the sole shareholder of the corporation in accordance with the provisions of Code Section 14-2-1003.
- (5) The corporation certifies that a notice of Intent to File Articles of Amendment to change the name of the corporation and a publishing fee of \$40.00 have been mailed or delivered to an authorized newspaper, as required by law.

J.E. HANGER, INC. OF GEORGIA

By:

  
Richard A. Stein  
Vice President, Treasurer and Secretary

November 26, 1996

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SECRETARY OF STATE  
NOV 27 9 53 PM '96  
BSR (1)

**NOTICE OF CHANGE OF CORPORATE NAME**

Dear Sirs:

You are requested to publish twice a notice in the following form:

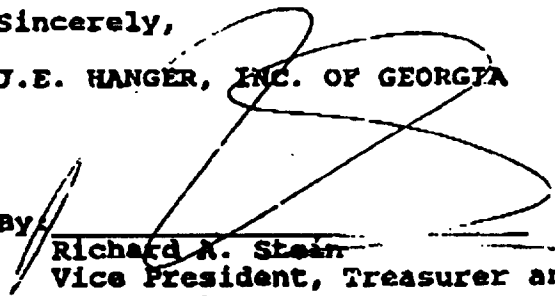
"Notice is given that articles of amendment which will change the name of J.E. Hanger, Inc. of Georgia to Southern Prosthetic Supply, Inc. will be delivered to the Secretary of State for filing in accordance with the Georgia Business Corporation Code. The registered office of the corporation is located at 1201 Peachtree Street, NE, Atlanta, Georgia 30361."

Enclosed is a check in the amount of \$40.00 in payment of the cost of publishing this notice.

Sincerely,

J.E. HANGER, INC. OF GEORGIA

By

  
Richard A. Stein  
Vice President, Treasurer and  
Secretary

BSR (1)

NOV 27 3 53 PM '95

SECRETARY OF STATE

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