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

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TO: The Commissioner of F

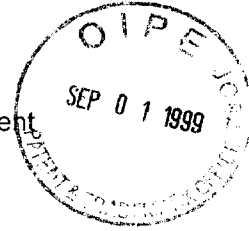
ne attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
- Document ID #
- Correction of PTO Error
- Reel # Frame #
- Corrective Document
- Reel # Frame #

Conveyance Type

- Assignment
- License
- Merger
- Security Agreement
- Change of Name
- Nunc Pro Tunc Assignment
- Effective Date:
- Other:



Conveying Party

Execution Date

Name AKORN MANUFACTURING, INC.

10-10-97

Formerly

- Individual General Partnership Limited Partnership Corporation Association
- Other
- Citizenship/State of Incorporation/Organization Illinois
- Mark if Additional Names of Conveying Parties Attached

Receiving Party

Name TAYLOR PHARMACEUTICALS, INC.

DBA/AKA/TA

Address 1222 W. Grand

Address

Address Decatur

City

Illinois

State/Country

62522

Zip Code

- Individual General Partnership Limited Partnership Corporation Association
- Other
- Citizenship/State of Incorporation/Organization Illinois
- Domestic Representative Designation Attached: Yes No
- Mark if Additional Names of Receiving Parties Attached

Correspondent Name and Address

Claudia M. Werner
Leydig, Voit & Mayer, Ltd.
Two Prudential Plaza, Suite 4900
Chicago, Illinois 60601-6780

Telephone: (312) 616-5600
Facsimile: (312) 616-5700
Attorney Docket No. 202196

Pages Enter the total number of pages of the attached conveyance document including any attachments: 5

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)

Registration Number(s)

0783911

0757205

Number of Properties

Enter the total number of properties involved: 2

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41): 65.00

Method of Payment:

- Enclosed
- Deposit Account No. 12-1216
- 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.

Claudia M. Werner

August 27, 1999

Name of Person Signing

Signature

Date

09/03/1999 00000013 0783911 40.00 25.00



OFFICE OF THE SECRETARY OF STATE

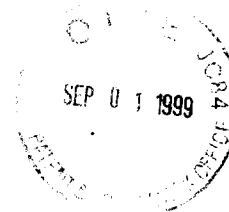
SPRINGFIELD, ILLINOIS 62758

GEORGE H. RYAN
SECRETARY OF STATE

DECEMBER 9, 1997

3054-826-4

BURKE, WARREN ET AL
330 N WABASH AVE 22ND FLOOR
CHICAGO, IL 60611-3607



RE AKORN MANUFACTURING, INC.

DEAR SIR OR MADAM:

ENCLOSED YOU WILL FIND THE CERTIFICATE OF AMENDMENT FOR THE ABOVE NAMED CORPORATION.

FEES IN THIS CONNECTION HAVE BEEN RECEIVED AND CREDITED.

PLEASE BE ADVISED IF YOU HAVE CHANGED THE CORPORATE TITLE, THE OLD NAME WILL APPEAR ON THE CERTIFICATE INSTEAD OF THE NEW CORPORATE NAME.

THE ENCLOSED CERTIFICATE MUST BE RECORDED IN THE OFFICE OF THE RECORDER OF THE COUNTY IN WHICH THE REGISTERED OFFICE OF THE CORPORATION IS LOCATED.

SINCERELY YOURS,

George H Ryan

GEORGE H RYAN
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
CORPORATION DIVISION
TELEPHONE (217) 782-6961

GHR:CD

Form **BCA-10.30**

ARTICLES OF AMENDMENT

(Rev. Jan. 1995)

File #

George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-1832

FILED

DEC 09 1997

GEORGE H. RYAN
SECRETARY OF STATE

SECRETARY OF STATE

This space for use by
Secretary of State

Date 12/9/97

Franchise Tax \$ 25

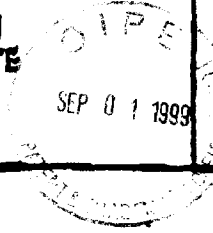
Filing Fee \$ 25

Penalty \$

Approved: [Signature]

Remit payment in check or money
order, payable to "Secretary of State."

*The filing fee for articles of
amendment - \$25.00



1. CORPORATE NAME: AKORN MANUFACTURING, INC.

(Note 1)

2. MANNER OF ADOPTION OF AMENDMENT:

The following amendment of the Articles of incorporation was adopted on October 10

19 97 in the manner indicated below. ("X" one box only)

By a majority of the incorporators, provided no directors were named in the articles of incorporation and no directors have been elected;

(Note 2)

By a majority of the board of directors, in accordance with Section 10.10, the corporation having issued no shares as of the time of adoption of this amendment;

(Note 2)

By a majority of the board of directors, in accordance with Section 10.15, shares having been issued but shareholder action not being required for the adoption of the amendment;

(Note 3)

By the shareholders, in accordance with Section 10.20, a resolution of the board of directors having been duly adopted and submitted to the shareholders. At a meeting of shareholders, not less than the minimum number of votes required by statute and by the articles of incorporation were voted in favor of the amendment;

(Note 4)

By the shareholders, in accordance with Sections 10.20 and 7.10, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by shareholders having not less than the minimum number of votes required by statute and by the articles of incorporation. Shareholders who have not consented in writing have been given notice in accordance with Section 7.10;

(Notes 4 & 5)

By the shareholders, in accordance with Sections 10.20 and 7.10, a resolution of the board of directors having been duly adopted and submitted to the shareholders. A consent in writing has been signed by all the shareholders entitled to vote on this amendment.

(Note 5)

3. TEXT OF AMENDMENT:

a. When amendment effects a name change, insert the new corporate name below. Use Page 2 for all other amendments.

Article 1: The name of the corporation is:

TAYLOR PHARMACEUTICALS, INC.

(NEW NAME)

All changes other than name, include on page 2
(over)

Text of Amendment

- b. *(If amendment affects the corporate purpose, the amended purpose is required to be set forth in its entirety. If there is not sufficient space to do so, add one or more sheets of this size.)*

- 4. The manner, if not set forth in Article 3b, in which any exchange, reclassification or cancellation of issued shares, or a reduction of the number of authorized shares of any class below the number of issued shares of that class, provided for or effected by this amendment, is as follows: (If not applicable, insert "No change")

No Change

- 5. (a) The manner, if not set forth in Article 3b, in which said amendment effects a change in the amount of paid-in capital (Paid-in capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts) is as follows: (If not applicable, insert "No change")

No Change

(b) The amount of paid-in capital (Paid-in Capital replaces the terms Stated Capital and Paid-in Surplus and is equal to the total of these accounts) as changed by this amendment is as follows: (If not applicable, insert "No change")

No Change

	Before Amendment	After Amendment
Paid-in Capital	\$ _____	\$ _____

(Complete either item 6 or 7 below. All signatures must be in BLACK INK.)

- 6. The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true.

Dated October 14, 19 97

Akorn Manufacturing, Inc.
(Exact Name of Corporation at date of execution)

attested by [Signature]
(Signature of Secretary or Assistant Secretary)

by [Signature]
(Signature of President or Vice President)

Brian J. McConville, Secretary
(Type or Print Name and Title)

Floyd Benjamin, President
(Type or Print Name and Title)

- 7. If amendment is authorized pursuant to Section 10.10 by the incorporators, the incorporators must sign below, and type or print name and title.

OR

If amendment is authorized by the directors pursuant to Section 10.10 and there are no officers, then a majority of the directors or such directors as may be designated by the board, must sign below, and type or print name and title.

The undersigned affirms, under the penalties of perjury, that the facts stated herein are true.

Dated _____, 19 _____

_____	_____
_____	_____
_____	_____
_____	_____