FORM PTO-1594 MRD 11,1.99 RE 11-05-15	Patent and Trackemark Office PROF. T101US
Tab settings □□□▼  To the Honcrable Commissioner of 10119382	
1. Name of conveying party(ies): Professional Nurse Associates, Inc.	2. Name and address of receiving party(ies)  Name: Health Design Plus, Inc.  Internal Address:
☐ Individual(s) ☐ Association ☐ General Partnership ☐ Limited Partnership ☐ Corporation-State Ohio ☐ Other	Street Address: 1755 Georgetown Road  City: Hudson State: Ohio ZIP: 44236  Individual(s) citizenship
Additional name(s) of conveying party(ies) attached?   Yes QXNo  3. Nature of conveyance:  Assignment  Security Agreement  Other  Execution Date:  October 1, 1999	□ Association □ General Partnership □ Limited Partnership □ Corporation-State Ohio □ Other  If assignee is not domiciled in the United States, a domestic representative designation is attached: □ Yes □ No  (Designations must be a separate document from assignment)  Additional name(s) & address(es) attached? □ Yes ☑ No
Application number(s) or patent number(s):     A. Trademark Application No.(s)  Additional numbers at	B. Trademark Registration No.(s)  1,920,364  tached? □ Yes ☑ No
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name: Warren A. Sklar  Internal Address:	7. Total fee (37 CFR 3.41)\$\\\_40.00\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Renner, Otto, Boisselle & Sklar, P.L.L.  Street Address: 1621 Euclid Avenue  Nineteenth Floor	8. Deposit account number:
City: Cleveland State: Ohio ZIP: 44115	(Attach duplicate copy of this page if paying by deposit account)
1 FC:481 9. Statement and signature To the best of my knowledge and belief, the foregoing inform the original document.  Warren A. Skl'ar Name of Person Signing Reg. No. 26,373 Total number of pages Including	mation is true and correct and any attached copy is a true copy o  10/28/5  Signature Date  Dover sheet, attachments, and document:

## ASSIGNMENT OF REGISTERED TRADEMARKS

WHEREAS, **Professional Nurse Associates, Inc.**, a corporation of the State of Ohio, having an address and place of business at 1755 Georgetown Road, Hudson, Ohio 44236 is the owner of the following United States Trademark Registration, the rights to the trademark set forth in said registration and the goodwill associated with the trademark:

TrademarkRegistration No.Date of RegistrationLIFESTART1,920,364September 19, 1995

WHEREAS, **Professional Nurse Associates**, **Inc.**, desires to assign to the Assignee identified below, the aforesaid United States Trademark Registration, the rights to the trademark set forth in said registration and the goodwill associated with the trademark;

WHEREAS, **Health Design Plus, Inc.**, a corporation of the State of Ohio, having an address and place of business at 1755 Georgetown Road, Hudson, Ohio 44236 desires to acquire and to own all rights, title and interest in the aforesaid United States Trademark Registration, the rights to the trademark set forth in said registration and the goodwill associated with the trademark:

NOW, THEREFORE, for one dollar (\$1.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby sells, assigns and transfers to Assignee the entire worldwide rights, title and interest in and to the aforesaid registration, the aforesaid trademark and the goodwill of the business symbolized thereby, together with all claims for damages by reason of past infringement of said trademark and/or trademark registration, including the right to sue in its own name and to collect said damages for its own use.

**Professional Nurse Associates, Inc.** 

Date: (Cc touce 1, 1999

By: Mun Williams

Name: Lenore Williams

Title: President

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**RECORDED: 11/01/1999** 

TRADEMARK
REEL: 001985 FRAME: 0187