FORM PTO-1618A Expires 06/30/2010 JAN 13 AM 10:

02-11-2000



OPR/FINANCE

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TRADEMARK

DECORDATION	ON FORM COVER CUEFT			
RECORDATION FORM COVER SHEET				
TRADEMARKS ONLY  TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).				
Submission Type	Conveyance Type			
<b>✓</b> New	Assignment License			
Resubmission (Non-Recordation) Document ID #	Security Agreement Nunc Pro Tunc Assignment  Effective Date			
Correction of PTO Error Reel # Frame #	Merger Month Day Year			
Corrective Document	Change of Name			
Reel # Frame #	Other Release			
Conveying Party	Mark if additional names of conveying parties attached Execution Date			
Name Jackson National Life Insurance Company  Month Day Year  12 16 99				
Formerly				
Individual General Partnership Limited Partnership Corporation Association				
Other				
Citizenship/State of Incorporation/Organization Michigan				
Receiving Party  Mark if additional names of receiving parties attached				
Name Medical Arts Press, Inc.				
DBA/AKA/TA				
Composed of				
Address (line 1) 8500 Wyoming Avenue North				
Address (line 2)				
Address (line 3) Brooklyn	Minnesota 55445			
Address (line 3) DIOOKIYII City	State/Country Zip Code			
Individual General Partnership	Limited Partnership If document to be recorded is an assignment and the receiving party is			
Corporation Association not domiciled in the United States, an appointment of a domestic				
Other	representative should be attached. (Designation must be a separate			
	document from Assignment.)			
Citizenship/State of Incorporation/Organization Minnesota				
FUR	R OFFICE USE ONLY			

01 FC:481

40.00 DP

25.00 DP

26.00 DP

27.00 DP

28.00 DP

29.00 DP

29.00

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

FORM PTO- Expires 06/30/99	1618B <b>Pa</b> ç	ge 2	U.S. Department of Commerce Patent and Trademark Office TRADEMARK		
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 (212) 735-4133					
Name	James Talbot				
Address (line 1)	e 1) Skadden, Arps, Slate, Meagher & Flom LLP				
Address (line 2)					
Address (line 3)	3) New York, New York 10036-6522				
Address (line 4)					
Pages	Enter the total number of pages of the air including any attachments.	ttached conveyance document	# 3		
Trademark Application Number(s) or Registration Number(s)  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)					
		1620638 1735158	<del></del>		
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  Deposit Account  (Enter for payment by deposit account or if additional fees can be charged to the account.)					
·	Deposit Accoun	t Number: #	19-2385		
Statement	<del></del>	charge additional fees: Yes	No 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					
<i>indie</i> James T	cated herein.	(//	1/12/00		
Name	of Person Signing	Signature	Date Signed		

## <u>RELEASE</u>

## (TRADEMARK)

THIS RELEASE (TRADEMARK) is given as of this <u>16</u> day of December. 1999 by Jackson National Life Insurance Company, a Michigan corporation ("Assignor"), to Medical Arts Press, Inc., a Minnesota corporation ("Assignee"). as follows:

WHEREAS, Assignor and Assignee entered into a Trademark Collateral Agreement, dated as of January 13, 1997 (the "Trademark Collateral Agreement"), which was recorded in the United States Patent and Trademark Office on January 23, 1997 at Reel 1527, Frame 0729, pursuant to which Assignee granted to Assignor a continuing security interest in each trademark, trademark registration and trademark application referred to in Schedule A-1 thereto, and identified in Exhibit A to this Release. (the "Marks"), all of the goodwill of the business connected with the use of, and symbolized by each such Mark, and all proceeds of the foregoing, including without limitation any claim by Assignor against third parties for damages for reason of past, present or future infringement of any Mark listed in Schedule A-1 thereto or by reason of injury to the goodwill associated with such Mark, in each case together with the right to sue for and collect said damages (collectively, the "Trademark Collateral") to secure performance of all Senior Secured Obligations of Assignor as set forth in that certain Intellectual Property Security Agreement dated as of January 13, 1997 between Assignor and Assignee (the "IP Security Agreement").

WHEREAS, Assignee has fully paid all its Senior Secured Obligations under the IP Security Agreement and Assignor desires to release its continuing security interests in and liens upon the Trademark Collateral;

NOW. THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Assignor hereby releases its security interest in and lien upon the Trademark Collateral and reassigns any and all interest it may have in such Trademark Collateral to Assignee and releases Assignee from any and all obligations under the Trademark Collateral Agreement.

IN WITNESS WHEREOF, Assignor has caused this RELEASE (TRADEMARK) to be duly executed by its officer thereunto duly authorized as of this 16 day of December, 1999.

JACKSON NATIONAL LIFE INSURANCE COMPANY

By: PPM America, Inc., its agent

By:\_

David Brett, Managing Director

STATE OF ILLINOIS

) SS.

COUNTY OF COOK)

On this <u>15</u> day of December, before me personally appeared David Brett known to me to be the individual who executed the foregoing instrument and acknowledged to me that he executed the same as the duly authorized officer of PPM America, Inc.

FFICIAL SEAL

NOTARY PUBLIC, STATE CT ILLINOIS \$
MY COMMISSION EXPIRES:02/22/03

Notary Public

## EXHIBIT A TO RELEASE

MARK	DATE REGISTERED	REG. NO.
Dr. Dewey	October 30, 1990	1,620,638
НМІ	November 24, 1992	1,735,158

TRADEMARK
RECORDED: 01/13/2000 REEL: 002020 FRAME: 0292